

# Des Moines Area Religious Council

## 2011 Bow Ties & Bowls Gala RSVP Form

*Seating is limited. Early reservations and sponsorships encouraged.*

To secure your reservation or sponsorship, complete and return this form to: Kristine Frakes at [kfrakes@dmreligious.org](mailto:kfrakes@dmreligious.org) or DMARC, 3816 36<sup>th</sup> St., Ste. 202, Des Moines IA 50310.

Questions? Please contact Kelly Sparks or Kristine Frakes at 515-277-6969.

**Name(s):** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City/State/Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

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\_\_\_ I/We would like to purchase \_\_\_ (#) individual reservation(s). (\$250 each)

\_\_\_ I/We would like to reserve \_\_\_ (#) table(s) of eight. (\$2,000 each)

\_\_\_ I/We would like to be an event Sponsor at the following tier.

\_\_\_ Presenting – 8 VIP guests (\$7,500) \_\_\_ Platinum – 6 VIP guests (\$5,000)

\_\_\_ Gold – 4 VIP guests (\$2,500) \_\_\_ Silver – 2 VIP guests (\$1,000) \_\_\_ Bronze – 1 VIP guest (\$500)

\_\_\_ I/We cannot attend but would like to donate \$ \_\_\_\_\_.

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**Reservation/Sponsor/Donation Total = \$ \_\_\_\_\_**

My/Our check for \$ \_\_\_\_\_ is enclosed.  
Please charge \$ \_\_\_\_\_ to my credit/debit card.  
Card Number: \_\_\_\_\_  
Expiration Date \_\_\_\_\_  
Name as it appears on Card \_\_\_\_\_  
Cardholder Signature \_\_\_\_\_

*NOTE: Tickets will not be mailed. Registered guests will check in at the Welcome Table.*

For **Table Reservations and Sponsors only**, indicate name(s) to appear in program:

\_\_\_\_\_

For **All Reservations and Sponsors**, please print guest names below.

1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

5. \_\_\_\_\_ 6. \_\_\_\_\_

7. \_\_\_\_\_ 8. \_\_\_\_\_

For vegetarian dinner option, please indicate how many: \_\_\_\_\_

Other dietary restrictions or special needs: \_\_\_\_\_

