



THE ROTARY CLUB OF KENT
ESCAPADES
DINNER & AUCTION

Saturday, May 5, 2018
Lindbloom Student Center at Green River College
Auburn, Washington
Silent auctions begin at 5:00 pm • Dinner at 7:00 pm

No-host cash bar • Free Parking

SPONSOR

Company Name _____

COMPLETE GUEST/BIDDER INFORMATION ON REVERSE SIDE OF THIS FORM

A meal choice of beef, salmon or vegetarian is available. Please check the appropriate box for each person on the reverse side of this form.

Check(s) enclosed. Please make your check payable to The Rotary Club of Kent Foundation

Charge ____ tickets to my VISA/MasterCard account # _____ expiration date _____

Name on card _____ Signature _____

Some or all individuals will be paying for their tickets - charge card information is on the reverse side

Please return this form to: Jenny Allyn - Kent Rotary Club
P.O. Box 1432
Kent WA 98035
or scan and email to JennyAllyn@msn.com

Questions? Information at www.kentrotary.com

Rotarian Contact: _____

Kent Rotary Escapades Gala & Auction • Reservation Form

Contact Name _____ phone _____

Name #1 _____ beef salmon vegetarian

Name #2 _____ beef salmon vegetarian

Address _____ Apt _____

City _____ State ____ Zip _____ Phone _____

Email _____

Do bidders #1 and #2 want a combined bid number? yes no

Charge to VISA/MC on front

Charge to this person's VISA/MC

Name on card _____

Expiration _____

Check for these people # _____

Name #3 _____ beef salmon vegetarian

Name #4 _____ beef salmon vegetarian

Address _____ Apt _____

City _____ State ____ Zip _____ Phone _____

Email _____

Do bidders #3 and #4 want a combined bid number? yes no

Charge to VISA/MC on front

Charge to this person's VISA/MC

Name on card _____

Expiration _____

Check for these people # _____

Name #5 _____ beef salmon vegetarian

Name #6 _____ beef salmon vegetarian

Address _____ Apt _____

City _____ State ____ Zip _____ Phone _____

Email _____

Do bidders #5 and #6 want a combined bid number? yes no

Charge to VISA/MC on front

Charge to this person's VISA/MC

Name on card _____

Expiration _____

Check for these people # _____

Name #7 _____ beef salmon vegetarian

Name #8 _____ beef salmon vegetarian

Address _____ Apt _____

City _____ State ____ Zip _____ Phone _____

Email _____

Do bidders #7 and #8 want a combined bid number? yes no

Charge to VISA/MC on front

Charge to this person's VISA/MC

Name on card _____

Expiration _____

Check for these people # _____