

PLEASE PRINT & USE THIS CARD IF YOU WISH TO CHARGE YOUR TICKETS

Number of Tickets: _____ Amount to Charge: _____

I am unable to attend but would like to make a donation of: _____

Please PRINT CLEARLY below ONLY for a CREDIT CARD

Please charge my gift to: Mastercard VISA Discover AmEx

Card # _____ Exp. ____/____ CID# _____

Name as it appears on card _____

Address _____

City _____ State _____ Zip _____

Phone Number (_____) _____ - _____ Email: _____ @ _____

Signature _____

Donations will be greatly appreciated and will directly benefit the Residents of St. Joseph's Home for the Elderly