

Ticket Form

Mt. Diablo Center for Adult Day Health Care's 43rd Annual Crab Feed



Saturday, February 10, 2018
5:30 PM Cocktails ~ 7:00 PM Dinner
Pleasant Hill Senior Center
233 Gregory Lane

Crab ● Music ● Live Auction Silent Auction ● Bar

Please detached and mail in with payment

EVENT TICKETS

\$65/ticket

Amount of tickets: _____ (# _____ Crab Dinners # _____ Chicken Dinners)

Name of ticket holders (please list all guests to make for a smooth check-in):

Friends I'd like to sit near (not in my ticket purchase, 8 per table): _____

DRINK TICKETS

Water/Soft Drinks (\$1): _____ Beer/Wine (\$5): _____ Mixed Drinks (\$7): _____ Bottle of Wine (\$20): _____

Pre-paid Drink Total \$: _____

RAFFLE TICKETS

\$5/ticket OR Bundle \$20/5 tickets

Amount of tickets: _____ Amount of bundle tickets: _____

We would be honored to receive a donation if you cannot attend.

PAYMENT:

Email: _____

Address: _____ City/State: _____ Zip: _____

Please indicate which method you will be using to pay

Enclosed is my check payable to Choice in Aging for: \$ _____

Charge my: Visa MC AMEX

Card #: _____ CVC/CVV Code: _____ Exp. Date: _____

Name of cardholder: _____

Signature: _____ Date: _____

Choice in Aging
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