



Veteran of the Year Reception and Dinner Reservation & Sponsorship Form

FIRST NAME

LAST NAME

COMPANY *(If Applicable)*

ADDRESS

CITY

STATE

ZIP

TELEPHONE

EMAIL

RESERVATIONS:

Individual Reservation _____ @ \$75 per person: \$ _____

Veteran Reservation _____ @ \$50 per person: \$ _____

GUEST NAMES: *(If needed, please attach additional guest names)*

SPONSORSHIPS:

\$750 TABLE SPONSOR:

Includes one table for 8 guests

_____ @ \$750 each: \$ _____

\$2,000 RECEPTION, DINNER AND ENTERTAINMENT SPONSOR:

Includes one table for 8 guests & signage

_____ @ \$2,000 each: \$ _____

\$5,000 VETERAN OF THE YEAR EVENT SPONSOR:

Includes three tables for 8 guests each, signage & remarks

_____ @ \$5,000 each: \$ _____

I/we cannot attend, but would like to make a tax-deductible donation in the amount of: \$ _____.

PAYMENT:

My check is enclosed payable to: **Veterans Transition House**

Please charge my: Mastercard VISA Discover

CREDIT CARD NUMBER

EXP. DATE

CVV

BILLING ADDRESS *(If different than above)*

For additional information, please
email info@vetshouse.org or call 508-992-5313 x 2

Please mail to:
Veterans Transition House
1297 Purchase Street, New Bedford, MA 02740

Visit www.vetshouse.org to learn more or to make
a tax-deductible donation. *Thank you.*