

Saturday, April 30, 2022

R.S.V.P. by Friday, April 22, 2022

\$55 Per Person Singles, Couples & Tables of 8

Print names of guests at your table on the back of this card

Yes... I/we will be attending

We cannot attend but would like to make a donation

Name: _____ Phone: _____

Address: _____ City: _____ St: ___ Zip: _____

Please provide email address for reservation confirmation:

Email: _____

_____ Reservations at \$55 each

Total: _____

Please enclose a check payable to: EAHS Scholarship Foundation
Proceeds benefit EAHS Scholarship Foundation



**Please list the guests' names
for your table and meal selection**

1. _____ Chicken or Filet
2. _____ Chicken or Filet
3. _____ Chicken or Filet
4. _____ Chicken or Filet
5. _____ Chicken or Filet
6. _____ Chicken or Filet
7. _____ Chicken or Filet
8. _____ Chicken or Filet

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