

UNITED WAY ANNUAL MEETING RESERVATION CARD

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Number of reservation: _____ x \$14 = \$ _____

_____ I'm unable to attend, but would like to help United Way
improve lives with this donation: Gift: \$ _____

Total Reservations: \$ _____

Please make reservations on or before February 10, 2012. Payment must accompany
reservations - early response is recommended. Group information on reverse side.

Payment Method:

_____ My check is enclosed, payable to United Way of
North Rock County

Please charge my: _____ VISA _____ Mastercard

Card Number: _____

Expiration Date: _____

Signature: _____

Please reserve a table of 6 for:

Organization Name: _____

Name of Attendees: _____

Return form and payment to:

United Way of North Rock County

205 N. Main St., Suite 101

Janesville, WI 53545

608.757.3040 or sgoike@uwnrc.org

GIVE. ADVOCATE. VOLUNTEER.

LIVE UNITED 

United Way
of North Rock County