



Yes! I'll be there!

Name: _____

Email: _____

You will receive a follow-up email requesting your guest name(s).

RSVP by September 18, 2017

Limited seating available

Safe Haven, P.O. Box 665, Shawano, WI 54166

Questions? Call: 715-526-3421 or Email: help@shawanoshelter.org

www.shawanoshelter.org



SAFE HAVEN

_____ Individual Ticket(s) x \$25 each = \$_____ total payment

_____ Table Sponsor (8 seats): \$200

_____ Regretfully, I cannot attend the event, but would like to support Safe Haven with a donation of \$_____

Payment information:

_____ Credit/Debit Card # _____

Exp Date: _____ / _____ CW: _____

_____ Check enclosed (payable to Safe Haven)

