



2010 October Fundraiser
Registration Form
 \$50 per person through **October 22nd 2010**

Name					
Home Address					
City		ST		Zip	
Phone					
E-Mail					
Credit card type					
Credit card number					
Expiration date		Verification number (on back of card, 3 digits)			
Name on Credit Card					
Billing Address					
City		ST		Zip	
Signature(s)				Date	

Guests attending:

1. _____
2. _____
3. _____
4. _____

Additional Donation Amount \$ _____

<p align="center">Total Amount Due: \$</p>

Please make checks payable to: **SOS at Zac's Ridge**

** A \$25.00 service fee will be added to all returned checks.*

SOS at Zac's Ridge is a non-profit 501(c)(3) organization for Federal income taxes. Please consult your tax accountant regarding the deductible portion of your contribution.