

HOM's 35th Anniversary Celebration | Saturday, May 4, 2024

Kindly respond by Saturday, April 20.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

- Individual seat(s): \$60 x _____ seat(s)
- Table Host: \$480 for 8 seats
- Friend: \$1,000 - Includes up to 4 seats; note # of seats desired: _____
- Patron: \$2,500 - Includes up to 8 seats; note # of seats desired: _____
- I am unable to attend. Enclosed is my tax-deductible donation in honor of HOM's 35th Anniversary.

TOTAL AMOUNT: _____ (See reverse for payment options)

Seating requests: _____

A portion of your ticket purchase is tax-deductible, and you will be provided a receipt for tax purposes.

PAYMENT:

- Enclosed check made payable to Haiti Outreach Ministries.

Credit Card

- Visa Mastercard Discover American Express

Name on card: _____

Card #: _____

Exp. Date: _____ Sec. Code: _____ Zip Code: _____



Mail completed response card & payment to:
HOM | PO Box 942 | Matthews, NC 28106

All proceeds will support the ministry's work in Haiti.