



Maria Droste
Counseling CenterSM

Colorado's Center for Mental Health



Spring Blossoms Gala
CULTIVATING MENTAL HEALTH

4-28-18

Individual or Table Registration via Cash or Check

Individual Registration	<input type="checkbox"/> Early Bird \$100 (Through April 6)	Qty: _____
	<input type="checkbox"/> General Sale \$125 (After April 6)	Qty: _____
		Total: _____
Table of 10	<input type="checkbox"/> Early Bird \$1000 (Through April 6)	Qty: _____
	<input type="checkbox"/> General Sale \$1250 (After April 6)	Qty: _____
		Total: _____

Contact Individual or Organization

Date

Attendee Name (Use back for 2+ attendees' information) Attendee Email***

Phone

Fax

Email

Address

City

State

Zip

- Enclosed is my cash or check for \$_____ payable to Maria Droste Counseling Center.
- Are you or your guests vegetarians? Please use back of paper if needed.

- Please send me a receipt upon processing payment. (Must provide email address to receive receipt)

*****If an email address is not provided for you and guests, guests will not receive tax receipts for any contributions or bids on Gala night. Guests without contact information will also miss reminders related to the event, including day-of details related to parking, changes in event schedule, etc.. We strongly recommended providing an email address for yourself and attending guest(s).*****

Please complete and return to:

Maria Droste Counseling Center
Attn: Erika Durbin
1355 S Colorado Blvd., Suite C-100
Denver, CO 80222-3305

Questions? Contact:

Erika Durbin
303-756-9052 x111
Erika_Durbin@MariaDroste.org

FILL OUT FRONT AND BACK TO COMPLETE REGISTRATION

REQUIRED ATTENDEE INFORMATION: Use the lines below to fill out individual information for everyone in your party (including yourself)

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Meal Type

*If guests' meal details vary night-of, please be advised that alternative meals may not be available.

Steak/Chicken Split Plate OR Vegetarian Option
(All menu items will be nut-free.)

Name

Email

1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____
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17.	_____	_____
18.	_____	_____
19.	_____	_____
20.	_____	_____