



THE SAN DIEGO CENTER FOR THE BLIND
WHITE CANE FUNDRAISING LUNCHEON
 Saturday, October 13, 2018

LUNCH MENU CHOICES

Please provide the NUMBER requested for each menu item BELOW:

Beef Short Ribs **Seared Salmon**

**Lunch also includes coffee, tea, salad and dessert.*

Please indicate special dietary needs:
 (or contact Audrey Walz at 619-583-1542 or awalz@sdcdb.org)

Vegetarian Vegan Gluten Free Other _____

GUEST NAMES *(Please print)*

_____	_____
_____	_____
_____	_____
_____	_____

*Please return this RSVP card before Monday, **October 1, 2018.***

- Please reserve _____ tables of 8 at \$560 each. Total \$ _____
- Please reserve _____ tickets at \$70 each. Total \$ _____
- Please reserve _____ Table Sign at \$100 each. Total \$ _____

Your sign(s), with your name on it, will be placed at your table(s). Please provide names for signs below:

I am unable to attend but wish to support the San Diego Center for the Blind with my tax-deductible donation of \$ _____. **Grand Total \$ _____**

Name/Organization: _____

Address: _____

Email: _____ Phone: _____

To pay by credit card: AMEX VISA DISCOVER MASTER CARD

Credit Card Number: _____ Expiration Date: ____/____

Name on the card: _____ 3-digit security code: _____

Signature: _____

- Make checks payable to San Diego Center for the Blind.
- Please complete and return this response with your payment to:
 San Diego Center for the Blind
 5922 El Cajon Boulevard
 San Diego, CA 92115
 ATT: WCD 2018