## Reservation Card RSVP by March 14, 2025 \$100 per Person

## Make check(s) payable to UCCO (Uplanders Club Charitable Organization)

	Guests (10 people per table)
Name	· · · · · · · · · · · · · · · · · · ·
Address	1
City State Zip	2.
PhoneEmail	
Please accept my reservation(s) forguests.	<ol> <li>4.</li> </ol>
All tickets will be held at the check-in table.	5
I regret I cannot attend. Please accept my donation of \$	6
Total Enclosed \$ Check # fortickets.	7
Please bill \$to	8.
Name on card	9
CC#Exp Date	10
CVC#Signature	10.
For information, call Kathy Kelcher at 951-529-6012 or email uplandersclubcharitable@gmail.com	☐ Check box if vegetarian meal is requested.  Please list special dietary accommodations needed:
Please list your guests on the other side.	



I wish to be seated at the table of:

Name