



Mr./Ms./Mrs./Dr. _____

Organization (if applicable): _____

Your Title: _____

Address: _____

City: _____ Zip: _____ Phone: _____

Email Address: _____

_____ Yes, I would like to order ___ ticket(s) at \$80 each (\$55 if FUSD teachers or clerical staff). Please seat me with _____

Here is my meal choice (if ordering for more than one person, please indicate # of meals):

_____ Flank Steak and Potatoes

_____ Salmon and Wild Rice

_____ Vegetable Napoleon

_____ Yes, I/my organization would like to be a table sponsor (\$800.00 for a table of 10).

_____ No, I will not be able to attend, but would like to make a donation.

My check for \$ _____ is enclosed.

**Please make checks payable to: Fremont Education Foundation
RSVP by February 15, 2012. Thank you for your support.**

No tickets will be issued. Names will be held at the door.

The Fremont Education Foundation is a non-profit 501(c)3 charitable organization.

Your ticket price is tax deductible, less \$42.

Fremont Education Foundation • 39120 Argonaut Way, #381 • Fremont, CA 94538