

WBASNY FOUNDATION, INC.

Name: _____

Telephone: _____

Enclosed is a check for _____ person(s).

- Individual @ \$ 185 Total \$ _____
- Party of Two @ \$ 350 Total \$ _____
- Table of Ten @ \$ 1,750 Total \$ _____

I am unable to attend, but would like to make a donation of \$ _____

Contributions to the WBASNY Foundation, a 501(c)(3) charity, are charitable donations that are tax deductible to the extent allowed by law. Please make checks payable to: *Women's Bar Association of the State of New York Foundation, Inc.*, and mail to WBASNY Foundation, Inc., P.O. Box 936, Planetarium Station, New York, NY 10024-0936. For further information, contact Linda Chilverini – 212-362-4445 or info@wbasny.org.

Please list guests on reverse side

Name of Guest(s)

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____