

ShamrAuction Luncheon Reservation

November 4, 2009, 10:30 a.m. - 1:00 p.m.

Hawthorn's Golf and Country Club
12255 Club Point, Fishers, IN 46037



- Yes!** I would like to reserve ____ seat(s). Donation(s) will be:
 \$50 cash (per person) Gift (\$50 value per person)
- Yes!** I would like to be a luncheon hostess to help underwrite the luncheon at \$100. I understand the hostess donation would be in addition to my luncheon gift donation. Please send your hostess donation prior to the luncheon, so we may include your name in the program!
- Yes!** I would like to be a table sponsor at \$500.00. My sponsorship includes a table for eight (8) in a preferred location, recognition of sponsorship in event program, Cathedral Highlights magazine, and the Insight newsletter.
- I am unable to attend, but please accept this donation of \$_____.

Please seat me with the following people:

| | |
|----------------------|----------------------|
| Name _____ | Name _____ |
| Address _____ | Address _____ |
| City/State/Zip _____ | City/State/Zip _____ |
| Phone _____ | Phone _____ |
| Email _____ | Email _____ |

| | |
|----------------------|----------------------|
| Name _____ | Name _____ |
| Address _____ | Address _____ |
| City/State/Zip _____ | City/State/Zip _____ |
| Phone _____ | Phone _____ |
| Email _____ | Email _____ |

| | |
|----------------------|----------------------|
| Name _____ | Name _____ |
| Address _____ | Address _____ |
| City/State/Zip _____ | City/State/Zip _____ |
| Phone _____ | Phone _____ |
| Email _____ | Email _____ |

| | |
|----------------------|----------------------|
| Name _____ | Name _____ |
| Address _____ | Address _____ |
| City/State/Zip _____ | City/State/Zip _____ |
| Phone _____ | Phone _____ |
| Email _____ | Email _____ |

Payment Information

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____ Total Amount: _____

E-mail: _____

Credit Card No.: _____ Discover MasterCard Visa

Expiration Date: _____ CVV code: _____
(three digit code on back of card)

Make checks payable to **Cathedral High School**. Check number: _____

To mail reservation, please return to:

Cathedral High School
Attn: ShamrAuction Luncheon
5225 E. 56th Street
Indianapolis, IN 46226



To submit reservation online:

1. Complete online reservation information form.
2. Once completed, click the '**Submit**' button in upper right hand
3. Click '**OK**' for desktop application.
4. Click '**Yes**' to submit your reservation to the Events Office;
credit cards are processed once form is received.

For more information, please call (317) 968-7311. Thank you!