

Reservation Form

Please Respond by Monday, June 15

_____ Benefactor (incl. invitation (by 5/27) & program listings)
\$300 per person \$ _____

_____ Patron (incl. program listing) \$225 per person \$ _____

_____ Single reservation \$175 per person \$ _____

_____ Corporate table for eight \$2,500 \$ _____
(incl. program listing & table signage)

Enclosed is my payment for \$ _____ for _____ reservations

I/We cannot attend but wish to donate \$ _____

Payment:

Check is enclosed for \$ _____

Please make check payable to Dearborn Orchestral Society

Charge \$ _____ VISA MC Amex Discover

Card No _____ CSC code _____ Exp. date _____

Signature _____

Name _____
(Benefactors & Patrons: Print name as you wish in program)

Address _____

City/State/Zip _____

Phone _____

e-mail _____

Reservations limited. Your check ensures your reservation (no tickets). Include payment with reservation. Vegetarian meal upon request by calling the Symphony office 313.565.2424.

Please list with whom you wish to sit below.

