

# Yes, I am happy to support Partnerships Adult Day Center!

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

\_\_\_\_ I / we will attend.

Names of those attending: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_ My check for \$45 per ticket is enclosed.\*

\_\_\_\_ I charged my \$45 per ticket using PayPal at  
[partnershipsadc.org/donate-now/](http://partnershipsadc.org/donate-now/) and added my name in the Note.\*

*\*For those attending, \$23 of each ticket is deductible.*

\_\_\_\_ I cannot attend. My gift to Partnerships is enclosed or sent by PayPal.



**Partnerships Adult Day Center**

3 Industrial Circle, Hamden, CT 06517

*Thank you for your support!*

