



Commitment Form for Dinner Showcase 2019

Name: _____ Phone #: _____

Email address: _____

I qualified for 2 Free Dinner Showcase Tickets w/ Gold Booster membership. Initial _____

Dinner Showcase Tickets; QTY _____x\$35/person \$ _____

Additional tickets Gold Membership; QTY _____x\$32/person \$ _____

Whole Table (10 people); QTY _____x\$325 /table \$ _____

Dinner Showcase Tickets after Jan. 31; QTY _____x\$40/person \$ _____

Whole Table (10 people) after Jan. 31; QTY _____ \$375/table \$ _____

Tax Deductible Cash Donation: (Our Family is not able to attend) \$ _____

Using my family Shares \$ _____

**Signature Needed for family Shares _____

Total (please make check payable to CHBB) \$ _____

PLEASE LIST YOUR NAME & NAME OF YOUR GUESTS THAT WILL SEATED AT YOUR TABLE

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

Number of meals: _____ **Tri-Tip & Chicken** _____ **Stuffed Portobellos** _____ **Vegan**

Please note:

1. Please submit this Commitment Form with your payment –use the self- addressed envelope.
2. Your cancelled check will be your receipt. We will issue receipts for cash payment.
3. A confirmation e-mail will be sent to you when we have received your RSVP and complete payment
4. CHBB has the status of a 501 (c)(3) organization. Donations are tax deductible to the extent allowed by law.
5. Your purchase is final and non-refundable unless the event is cancelled.
6. **DO NOT PUT CASH IN ENVELOPE IF USING THE MAILBOX IN THE BAND ROOM—CHECKS ONLY**

CHSIMB: P.O. BOX 2114, Concord, CA 94521 CHBB FED ID#: 51-0194002
State Registration #: CT-022220