

Yes! I'm coming to the Art in the Garden Gala!

Guest Name(s): _____

Street Address: _____

City, State, ZIP: _____

Phone: _____

Email: _____

_____ Event Tickets: \$75 each Total \$ _____

_____ Raffle Tickets: \$5 each or 5 tickets for \$20 Total \$ _____

_____ Donation to help make the event a success Total \$ _____

Grand Total \$ _____

PAYMENT OPTIONS:

_____ Check payable to **Laguna Foundation**

_____ I prefer to charge my card. (Visa, MC, Discover, or Amex)

Credit Card # _____

Expiration ____/____ Signature _____