



2014 Recipient Ticket Request Form

On behalf of Southern Eye Bank's Board of Trustees and staff, we wish to invite you and your guests to the 7th Annual Gift of Sight Celebration.

2014 Recipients may receive 2 complimentary tickets to the event.

- Additional tickets may be purchased at \$25 per ticket.
- Children two and younger are admitted free.

All proceeds are directly used to fund the Celebration. Please complete the request form before **February 27, 2015**. Mail, Email or Fax the bottom portion to Southern Eye Bank.

MAIL TO: Southern Eye Bank • 2701 Kingman Street Ste 200 • Metairie, LA 70006

EMAIL TO: info@SouthernEyeBank.com • **FAX TO:** 504-891-2401

Tickets will be mailed on or before 3/9/2015. T-shirts will be available for pick-up at the Celebration. If you wish to order T-Shirts and cannot attend the celebration, please provide us with your address.

PLEASE COMPLETE THE FOLLOWING INFORMATION:



Name of Requestor: _____
(please print)

Address to where ticket(s) should be mailed:

Phone: _____ Email: _____

Recipient's Name: _____

TICKET | T-SHIRT INFORMATION:

Please send me _____ complimentary tickets.
(up to 2)

Please send me _____ additional tickets at \$25 per ticket.

Please send me _____ "Age 2 and under" tickets (free).

of T-Shirts (\$10 all sizes) requested _____ \$ _____

Child Sizes: XS _____ S _____ M _____ L _____

Adult Sizes: S _____ M _____ L _____ XL _____

XXL _____ 3X _____ 4X _____ 5X _____

T-shirts are standard unisex pre-shrunk cotton.

PAYMENT INFORMATION:

CHECK: \$ _____ *(payable to Southern Eye Bank)*

CREDIT CARD: \$ _____

Credit Card Number (Master Card or Visa):

Credit Card Holder Signature:

Credit Card Billing Address:

Security Code: _____ Expiration: _____