



**PLEASE JOIN US ON September 13, 2025**

Name \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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

\_\_\_\_\_ # of tickets at \$125 each

\_\_\_\_\_ I am a sponsor (list names on reverse side)

\_\_\_\_\_ I am unable to attend, but would like to make a tax-deductible donation to support the work of MSCF.

Check enclosed for \$: \_\_\_\_\_

Please make checks payable to: **Main Street Community Foundation**

***Please list names of attendees on reverse side.***

***RSVP by August 29, 2025***

*For Federal Income Tax purposes,  
any amount in excess of \$100 per person is tax deductible.*





## TABLE SEATING

\_\_\_ Please seat me/us at an available table.

\_\_\_ Please seat me/us with \_\_\_\_\_

**Guests at my table:** *We strive to host inclusive, accessible events. Make note of any allergies below, and for questions about accessibility or to request an accommodation, attach your requirements to this card or contact MSCF.*

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

**Questions:** Contact Julie Matthews at **860.583.6363, ext. 1**  
or **[julie@mainstreetfoundation.org](mailto:julie@mainstreetfoundation.org)**.

