

Groquet Classic

PLEASE RESPOND BY SEPTEMBER 4, 2008

YES, I/WE WILL ATTEND _____

Number of persons attending _____ x \$175 = \$ _____

(list names on reverse side)

Additional contribution \$ _____

Amount enclosed \$ _____

I am/We are unable to attend,
but enclose a contribution of \$ _____

Please make checks payable to The Foundation for Mental Health
and return in the enclosed envelope.

The Foundation for Mental Health is a 501(C)3 nonprofit
corporation. Seventy-five dollars per person is fully tax deductible.

Thank you for your kindness in supporting
The Foundation for Mental Health.

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PLAYER AND SPECTATOR NAMES

Lunch seating will be tables of ten. I/We would like to be seated with:

www.thefoundationformentalhealth.org

For answers to any of your questions, please call
The Foundation for Mental Health at 860.674.8920.