



Transforming Lives Through Literacy  
Formerly Literacy Council of Buncombe County

Please mail this reservation form to:  
**Literacy Together**  
31 College Place, Suite B-221  
Asheville, NC 28801

Call with questions: (828) 254-3442

***The 13<sup>th</sup> Annual Authors for Literacy Dinner and Auction  
Thursday October 28, 2021 featuring author Delia Owens***

***RESERVATION FORM***

\_\_\_\_\_ **Yes, I wish to reserve \_\_\_\_\_ general admission ticket(s) at \$95 each**, which includes dinner with keynote author Delia Owens.

\_\_\_\_\_ **Yes, I wish to reserve \_\_\_\_\_ table(s) at \$760 each**, which includes eight general admission tickets.

\_\_\_\_\_ **For current tutors only: I wish to reserve \_\_\_\_\_ general admission ticket(s) at \$75 each**, which includes dinner with keynote author Delia Owens.

\_\_\_\_\_ **No, I cannot attend but wish to support Literacy Together with a gift of \$\_\_\_\_\_.**  
(note: total amount is tax-deductible)

\*\*\*\*\*

**Guest Names:** \_\_\_\_\_  
(Please list additional guests and seating requests on the next page)

\_\_\_\_\_ Check enclosed

**--or--**

\_\_\_\_\_ Bill my credit card

Name on account: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_, \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiration: \_\_\_\_\_ Security code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

*Financial information about this organization and a copy of its license are available from the State Solicitation Licensing Section at (919) 807-2214. The license is not an endorsement by the State. The Literacy Council of Buncombe County is qualified as a charitable organization under Section 501(c)(3) of the Internal Revenue Code. The amount of the contribution which is deductible for federal income tax purposes is limited to the excess over the value of the goods or services provided by the Literacy Council of Buncombe County. The tax-deductible portion of an Authors for Literacy ticket purchase is \$55 per ticket.*



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*SEATING AND MEAL PREFERENCES*

Please list the individuals you would like seated at your table, their contact information, and any dietary restrictions (vegetarian, vegan, gluten-free, etc). **Important Note:** Unless specifically requested on this form, guests will be seated in the order in which we receive their reservations.

<i>Name</i>	<i>Mailing Address</i>	<i>Dietary Restrictions</i>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____