



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
Questions? Email: luann@lit-together.org
Call: (828) 254-3442 x206

***The 14th Annual Authors for Literacy Dinner and Auction
Thursday May 4, 2023 featuring author Silas House***

RESERVATION FORM

_____ **Yes, I wish to reserve _____ general admission ticket(s) at \$95 each**, which includes dinner and keynote with author Silas House.

_____ **Yes, I wish to reserve _____ VIP ticket(s) at \$500 each**, which includes two general admission tickets, the VIP reception with author Silas House, dinner, and author’s keynote.

_____ **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 and keynote with author Silas house.

_____ **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. _____	_____	_____