

THE UNIVERSITY OF NEW HAVEN'S
26TH ANNUAL ALUMNI SCHOLARSHIP BALL

RSVP by March 20, 2009

PATRON Reservations at \$350 per person
Number of guests _____
Please list names of guests on the reverse side.

FRIEND Reservations at \$175 per person
Number of guests _____
Please list names of guests on the reverse side.

CONTRIBUTOR We are unable to attend, but please accept our gift of
\$ _____ for the Alumni Scholarship Fund.

NAME _____

PROGRAM RECOGNITION SHOULD APPEAR AS FOLLOWS:

ADDRESS _____

CITY, STATE, ZIP _____

DEGREE _____ GRADUATION YEAR _____

TELEPHONE _____

EMAIL _____

My check for \$ _____ is enclosed
(make payable to *UNH Alumni Scholarship Fund*)

Please charge this reservation to my credit card:

MasterCard Visa American Express

Card# _____

Security Code _____ Expiration Date ____ / ____

Cardholder's Signature _____

Pay online at www.newhaven.edu/alumni/scholarshipball2009

NAMES OF GUESTS

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

9. _____

10. _____