

WHO DOES SHE
THINK SHE IS?
5

Name of attendee:

Use back of card for additional attendee information.

Address:

Day phone:

E-mail:

- Please reserve _____ seat(s) @ \$35 each for a total of \$_____
- I am unable to attend but please accept my gift to further the important work conducted by WCW:
- \$50 \$100 \$250 \$500 \$1,000 \$2,500 Other \$_____

Please return this completed card with your credit card information or check made payable to the Wellesley Centers for Women.


Credit Card: American Express Mastercard VISA

Card #:

Expiration date:

Name on card:

Thank you!



Name of attendee:

Address:

Day phone:

E-mail:

Name of attendee:

Address:

Day phone:

E-mail:

