

RNFOO Shared Ticket Program Multiple Donor Form

Organizer's Name: _____

Organizer's E-mail Address _____ Phone Number: _____

Attendee's Name: _____

Attendee's E-mail Address: _____

Donors:

Name:	Donation Amount:
E-mail Address:	
Name:	Donation Amount:
E-mail Address:	
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Name:	Donation Amount:
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¹ E-mail address is required for communicating information about the Gala