



*Kevin M. Eidt Scholarship Fund
7 Bumblebee Lane ~ Norwalk, CT ~ 06851
www.KevinsFund.org ~ KevinsFund@aol.com*

Saturday, April 5, 2025 Ticket Reservation Form

Number of tickets _____ @ \$150. Amount enclosed \$_____

Number of patron tickets _____ @ \$200. Amount enclosed \$_____
Patrons receive cocktail hour amenities and recognition in the event program.

Meal Selection Please indicate number in the space provided. Chateaubriand_____, Chicken Francese_____, Broiled Salmon _____, Gluten Free/Vegetarian/Vegan_____.

I am/we are unable to attend but have enclosed a contribution of \$ _____ in support of Kevin's Scholarship Fund.

[] Contribution is in memory ___ or in honor ___ of_____. Individual named will be recognized in the event program.

[] I/we wish this contribution to remain anonymous.

Name: _____
Address: _____
Email: _____
Phone: _____

[] My company has a matching gift program.

Please provide company name, program contact, and address:_____

Please make checks payable to: **Kevin M. Eidt Scholarship Fund**. Return payment and ticket reservation form by **Saturday, March 8th** to:

**Dr. & Mrs. Thomas J. Calnon
c/o Kevin M. Eidt Scholarship Fund
7 Bumblebee Lane, Norwalk, CT 06851**

If you have any questions please contact Suzanne or Tom at 203-847-6826. Ticket confirmation will be emailed shortly after receipt of your reservation. For income tax purposes, the tax-deductible portion of each ticket reservation is \$50, and for each patron ticket reservation is \$75. Contributions for those not attending the event are 100% tax-deductible and will be acknowledged following the benefit event.

Table Reservations

Please indicate any seating preference you may have. We will make every effort to accommodate your request and will contact you if we are unable to fulfill the requested arrangements.

