

REIN IN SARCOMA sign in sheet

Please include and return the **Guest List & Donation List** with all contact and donation information

| Name | Gift \$ Amount | Phone # | Email addresss | Address | City, State, Zip |
|------|----------------|---------|----------------|---------|------------------|
| 1. | | | | | |
| 2. | | | | | |
| 3. | | | | | |
| 4. | | | | | |
| 5. | | | | | |
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| 8. | | | | | |
| 9. | | | | | |
| 10. | | | | | |
| 11. | | | | | |
| 12. | | | | | |
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| 16. | | | | | |
| 17. | | | | | |
| 18. | | | | | |
| 19. | | | | | |
| 20. | | | | | |

HOUSE | NEIGHBORHOOD PARTY HOST

Name: _____

Address: _____

City, State Zip: _____

Phone Number: _____

Number of Guests: _____ Total Revenue Raised: \$ _____

☐ Yes, I met my goal of raising \$100 or more. Please ship me my RIS Window Decal

DONATIONS LIST **Please include the Guest List with all contact information*



| Name | Donated Amount | Check Number |
|------|----------------|--------------|
| 1. | | |
| 2. | | |
| 3. | | |
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