



Legacy Gala 2010 Committee

Name: _____

E-mail Address: _____

Home Phone Number: _____

Cell Phone (optional): _____

Preferred Meeting Day(s)/Time: _____

I am willing to assist as a committee member in the following ways:

- _____ Solicit Auction Item Donations
 - _____ Businesses
 - _____ VMA / CP Sports Teams
 - _____ Students (class projects)

_____ Host / Assist with Gift Gathering Party(s)

_____ Solicit Sponsorships

_____ Design / Procure LG Guest Gift/Favor

_____ Dessert Table (organize volunteer bakers)

- _____ Assist with Administrative Tasks
 - _____ Invitations/Mailing
 - _____ Silent Auction Inventory
 - _____ Reservations/Guest Management
 - _____ Check Out Procedures / Volunteers
 - _____ Event Set Up/Tear Down

_____ Other: _____