

GUEST INFORMATION FORM

Please provide full contact information for ALL guests at your table. It makes their check-in process simple and smooth.

Once you complete the form, please save and email it as an attachment to Ann Berryman, ann@pinklemonadeproject.org

DEADLINE: Tuesday, April 30, 2024

Table Name:

Guest	Address	City	State	Zip	Phone	Email	Special Accommodations	Sharing a bid # w/ guest #
Example: Mary Doe	(Tab to next box) 123 Main	Vancouver	WA	98665	360.333.4444	marydoe@juno.com	Vegetarian/Vegan/ Gluten Free	2
1.								
2.								
3.								
4.								
5.								
6.								
7.								
8.								
9.								
10.								