



**Spurlock Museum Gala  
November 17, 2017  
Reservation Form**

Name: \_\_\_\_\_ Buffet \_\_\_ or Vegetarian \_\_\_

Address: \_\_\_\_\_

City / State / Zip \_\_\_\_\_

Phone # / email address: \_\_\_\_\_

Amount Enclosed \$ \_\_\_\_\_ (\$100/person or \$900/10 person table)

A portion of the ticket price is tax deductible to the extent allowable by law.

Guest: \_\_\_\_\_ Buffet \_\_\_ or Vegetarian \_\_\_

Guest: \_\_\_\_\_ Buffet \_\_\_ or Vegetarian \_\_\_

Guest: \_\_\_\_\_ Buffet \_\_\_ or Vegetarian \_\_\_

Guest: \_\_\_\_\_ Buffet \_\_\_ or Vegetarian \_\_\_

Guest: \_\_\_\_\_ Buffet \_\_\_ or Vegetarian \_\_\_

Guest: \_\_\_\_\_ Buffet \_\_\_ or Vegetarian \_\_\_

Guest: \_\_\_\_\_ Buffet \_\_\_ or Vegetarian \_\_\_

Guest: \_\_\_\_\_ Buffet \_\_\_ or Vegetarian \_\_\_

Guest: \_\_\_\_\_ Buffet \_\_\_ or Vegetarian \_\_\_

\*If you or any of your guests have any other dietary restrictions, please specify on additional sheet as needed.

Checks payable to: **University of Illinois Foundation**

Please write **Spurlock Museum Gala** on the check memo line.

Mail check to: **Spurlock Museum Gala  
Spurlock Museum  
600 S Gregory Street  
Urbana, IL 61801**