



Join Us!

at the

2019 Good Shepherd Mardi Gras Ball & Auction

Saturday, February 8, 2020

7:00pm—12:00am

Good Shepherd Family Center

5900 Oleander Drive

Orlando, Florida 32807

Seating is limited and reservations will only be held with payment.

Since 2002, we have been celebrating members of our community who by their actions have made a difference to our community in a positive, influential way. All monies raised at the Mardi Gras Ball and Festival help with the daily expenses that our Parish needs to support the life of our parish community.

Our Special Evening will Feature:

- ◆ Welcome by our Parish Mardi Gras Captain Fr. Jim Henault, M.S.
- ◆ Presentation of the 2020 Royal Court
- ◆ Dinner and Dancing; Entertainment until midnight
- ◆ Raffle Baskets & Silent Auction. *Payment by cash, check or credit card: Visa, MC, DC or Amex*
- ◆ Complimentary Signature Drink (BYOB if you like. Set ups provided)
- ◆ Cocktail, semi-formal or formal attire OR dress the theme "Mardi Gras Celebrates The Far East"

Ticket Prices

\$60 per person

\$110 per couple

\$400 per table/8

All guest names and payment must be submitted at the same time to secure reservations.

Ticket Information: Please complete and return form with payment.

In person: to the Good Shepherd Catholic Church office
 Via Fax: 407-273-5148
 By Mail: Good Shepherd Mardi Gras Committee • 5900 Oleander Drive • Orlando, FL 32807
 Online: through Online Giving at www.goodshepherd.org

Name: _____ Address: _____

City/State/Zip: _____

Email (for confirmation): _____

Please reserve a table in the name of: _____

Additional Guest Names: _____

Purchase Tickets: 1/\$60 • 2/\$110 • 8/\$400 # _____ \$ _____

Total Purchase (OR unable to attend, but please accept my donation of): \$ _____

Payment Information (check one): Credit Card (enter below or go to ONLINE GIVING at www.goodshepherd.org)

Check (payable to: Good Shepherd Parish) Check# _____ Cash Online Giving (www.goodshepherd.org)

Credit Card # (Visa, MasterCard, Discover or American Express): _____

Expires: _____ Signature: _____ CCV Code: _____ Billing Zip: _____