

# **The Highland Area Community Foundation 29TH ANNUAL GRANTS BANQUET**

Thursday, October 10, 2024

Name \_\_\_\_\_

Enclosed is my check for \$\_\_\_\_\_ for \_\_\_\_\_ reservations.

Dietary Restrictions: \_\_\_ Gluten Free \_\_\_ Vegetarian \_\_\_ Vegan

I cannot attend the banquet, but my donation in the amount of \_\_\_\_\_ is enclosed.

**Please make checks payable to:  
Highland Area Community Foundation**