The Delta Kappa Gamma Society International
Alpha Beta Chapter
RESPONSE FORM

2025 Holiday Gala Scholarship Dinner

WEDNESDAY, DECEMBER 3, 2025, at 5:00pm **$65 per person**

Please tear off and return your 50-50 Raffle Tickets and RESPONSE to:

Mary Ann Baldari, 26 Joel Place, Staten Island, New York 10306

PAYABLE TO ALPHA BETA FOUNDATION TOTALING THE SUM OF THE FOLLOWING:

DINNER $65
+50-50 RAFFLE TICKETS
TOTAL – ONE CHECK PAYS FOR ALL

Everyone (NO MATTER THEIR LOCATION) can purchase
50-50 RAFFLE TICKETS

The winner will be announced at the Holiday Gala

Please Return before November 24, 2025 in order for us to set up the tables and keep an accurate account

_____ I will attend the Holiday Gala on WEDNESDAY, DECEMBER 3, 2025

Member's Name: _____

Guest(s): _____

Total No. of People _____@$65 per person = _____

____I cannot attend the Holiday Gala on WEDNESDAY, DECEMBER 3 but would like to donate to the Scholarship Fund. Enclosed is my check in the amount of $ _____

PAYABLE TO ALPHA BETA FOUNDATION
PLEASE CUT BENEFIT AND 50-50 RAFFLE TICKETS AND ENCLOSE WITH THE RESPONSE FORM

If you wish to sit with someone, please write their name(s) below

_____

_____

ALPHA BETA CHAPTER
HOLIDAY GALA 50 – 50 TICKETS ONLY

PLEASE CHECK ONE

PLEASE ENCLOSE WITH RESPONSE FORM

_____ **$15 FOR 1 TICKET**

_____ **$20 FOR 2 TICKETS**

_____ **$25 FOR 3 TICKETS**

ALPHA BETA CHAPTER 50 – 50 BENEFIT TICKET

NAME: _____

ADDRESS: _____

_____

PHONE: _____

ALPHA BETA CHAPTER 50 – 50 BENEFIT TICKET

NAME: _____

ADDRESS: _____

_____

PHONE: _____

ALPHA BETA CHAPTER 50 – 50 BENEFIT TICKET

NAME: _____

ADDRESS: _____

_____

PHONE: _____