



**Iowa State University Alumni Association
Cardinal & Gold Gala
2014 Table Host Form**

Please mail to address below or fax to 515-294-9402. In order to receive printed name recognition in the Cardinal & Gold Gala program, full payment and the completed form are due no later than **Friday, January 17, 2014.**

Table Host Name _____
(Please print your name as you would like it to appear in print materials.)

E-mail address or telephone number _____



\$25 per ticket discount for entire table!

☐ **Young Alumni Table \$600**

(All ISU graduates at the table must be within 10 years of his/her 1st degree from ISU)

Number of Tables **Total**
_____ = \$ _____

☐ **Cardinal and Gold Contributor Table \$800**

_____ = \$ _____

Please list all guests to be seated at your table (including yourself). **If anyone at your table has special dietary needs** (allergies, vegetarian, etc.), please make a note by the appropriate name below or email Katie Lickteig, kbruxvoo@iastate.edu.

1. Your Name _____
Address _____
City _____ ST _____ Zip _____
ISU Grad ____ yes ____ no Year _____

2. Name _____
Address _____
City _____ ST _____ Zip _____
ISU Grad ____ yes ____ no Year _____

3. Name _____
Address _____
City _____ ST _____ Zip _____
ISU Grad ____ yes ____ no Year _____

4. Name _____
Address _____
City _____ ST _____ Zip _____
ISU Grad ____ yes ____ no Year _____

5. Name _____
Address _____
City _____ ST _____ Zip _____
ISU Grad ____ yes ____ no Year _____

6. Name _____
Address _____
City _____ ST _____ Zip _____
ISU Grad ____ yes ____ no Year _____

7. Name _____
Address _____
City _____ ST _____ Zip _____
ISU Grad ____ yes ____ no Year _____

8. Name _____
Address _____
City _____ ST _____ Zip _____
ISU Grad ____ yes ____ no Year _____

Reply requested no later than Friday, January 17, 2014:

Cardinal and Gold Gala, ISU Alumni Center, 420 Beach Ave., Ames, IA, 50011-1430 or fax (515) 294-9402