

VOICES & VISIONS

October 15, 2020 | Seaport Hotel

TABLE GUEST LIST FORM



TABLE SPONSOR NAME (as you want it listed)

CONTACT NAME

DAY PHONE

EMAIL

FAX

Corporate Twitter Handle _____

I will be donating _____ seats back to The Home for Little Wanderers

**For speedy check in and the ability to preview or pre-bid on auction items please include your guests email address and cellphone number below. Please be sure to indicate on this sheet if any of your guests have special dietary needs*

GUEST NAME

CELL PHONE

EMAIL*

BEEF VEGETARIAN

1.

2.

3.

4.

5.

6.

7.

8.

9.

10.

Please return this form by Thursday, October 1, 2020

Send completed form or questions to: Jamille Benson at jbenson@thehome.org | 617-927-0682

10 Guest Street Boston, MA, 02135