

Yes, \_\_\_\_\_ will attend  
*Barbara Goodman: A gala salute to benefit The Healing Place of Wake County.*

*I/we would like*

\_\_\_\_\_ *Corporate Table (\$10,000)*

\_\_\_\_\_ *Individual Table (\$2,500)*

\_\_\_\_\_ *Couples (\$500)*

\_\_\_\_\_ *Individual (\$250)*

*Please indicate any dietary restrictions.*

\_\_\_\_\_ *No, I cannot attend but would like to honor Barbara Goodman  
and support the work of The Healing Place of Wake County.*

\_\_\_\_\_  
*I have enclosed a check made out to THE HEALING PLACE OF WAKE COUNTY  
OR*

*I would like to charge my tickets to my Mastercard or Visa.*

*Card Number:* \_\_\_\_\_ *Expiration Date:* \_\_\_\_\_

*Signature:* \_\_\_\_\_

*\*A large portion of the ticket price is tax-deductible. Tax deductible receipts will be issued to corporate and individual donors*