



dinner is served
2011 Party Host Agreement

We would like to invite you to join ACCESS AIDS Care in our **18th Annual Dinner is Served—Paint The Town (RED)** event! Let's celebrate each other, let's celebrate what ACCESS AIDS Care is doing in the community and let's celebrate life! Will you consider hosting a Dinner Is Served party this year?

YES, I will host a dinner/party to benefit ACCESS AIDS Care!

NO, my plate is already full and I am unable to host a dinner/party, but please accept the enclosed donation of \$_____

And don't worry, dessert is on us! After your dinner party, you and all your DIS guests are invited to the **18th Annual Dinner Is Served Champagne & Dessert Gala**. For more information about the event and Dinner Is Served, please visit our website at www.accessaids.org.

To make things even easier, ACCESS AIDS Care will provide invitations (print and electronic) and donation envelopes for your dinner party.

Anticipated dinner/party date and time: _____

Anticipated number of invited guests: _____

PARTY HOST(S) - Please include Name, Address, Phone and Email Address.

1. _____
Name (first and last) Email

Address (Street, City, State, Zip Code) Phone

2. _____
Name (first and last) Email

Address (Street, City, State, Zip Code) Phone

3. _____
Name (first and last) Email

Address (Street, City, State, Zip Code) Phone

4. _____
Name (first and last) Email

Address (Street, City, State, Zip Code) Phone

5. _____
Name (first and last) Email

Address (Street, City, State, Zip Code) Phone

Primary contact if more than one host:

I/We have hosted a DIS dinner or party.

NEVER ONCE TWICE THREE +

Comments: _____

Signature of Party Host: _____

Signature of ACCESS AIDS Care: _____



AIDS Care Center for Education & Support Services

MAIL TO:

Dinner Is Served
c/o ACCESS AIDS Care
222 W. 21st St, Ste F-308
Norfolk, VA 23517

OR FAX TO:

(757) 622-8932

OR EMAIL TO:

kburnworth@accessaids.org

Questions? 757.640.0929

PLEASE RETURN THIS FORM TO: