

Name: _____

Company: _____

Address: _____

Phone: _____

Email: _____

Email requested to help reduce mailing costs

Guest List and Events

1. _____

2. _____

3. _____

4. _____

Sponsor Level: _____

Donation Only

Total Enclosed: \$ _____

Credit Card: Visa MasterCard American Express

Card No.: _____

Name on Card: _____

Expiration Date: Month _____ Year _____

Billing Address: _____

Signature: _____

Seena Magowitz Foundation is a 501(C)(3) non-profit organization.
 Seena Magowitz Foundation Federal Tax I.D. Number 20-4751072



Choose one of many ways to register or give.

Fax: 602-467-3214

Mail: 15215 N Kierland Blvd #409, Scottsdale, AZ 85254

Online: www.seenamagowitzfoundation.org/register

Call: Liz McBeth at 757-773-3622

Email: liz@seenamagowitzfoundation.org

November 1-3, 2019 Arizona Biltmore

I plan to be involved in the following way(s):

- Saturday Western Event at Corona Ranch
- Saturday Seena Dinner
- Sunday Golf Tournament
- Sponsorship only
- Sponsor a Pancreatic Cancer patient or researcher to attend the dinner
- Survivor (Pancreatic Cancer patients are invited to attend the dinner at no charge)
- I cannot attend but want to help fund pancreatic cancer research. Enclosed is my donation.

Seena Magowitz
 FOUNDATION

The Face and Voice for Pancreatic Cancer

Please make checks payable to:
Seena Magowitz Foundation
 15215 N Kierland Blvd #409
 Scottsdale, AZ 85254

All entries must be received by October 20, 2019