

THANK YOU FOR SUPPORTING THE ALLIANCE FOR POSITIVE HEALTH!

DRAWING ENTRY FORM



Please fill out the information below to enter the drawing. A tax-deductible donation is not required to enter but is greatly appreciated. The winner will be selected by random drawing on 6/28/21 and will be notified by phone and/or email no later than 6/29/21. Please email your completed form to development@alliancefph.org or mail to Alliance for Positive Health, attn: Dining Out For Life®, 927 Broadway, Albany, NY 12207 by 6/18/21.

Name: _____ Email: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Telephone: _____ Ambassador: _____

Amount of Contribution

- \$25 pays for 250 condoms
- \$50 provides 50 city bus passes
- \$75 provides one HIV/STI test and counseling session
- \$100 provides 2 weeks supply of food for a family of four
- Other Amount: _____



- Cash Check (made payable to Alliance for Positive Health) Mastercard Visa American Express

Card Number: _____
 Expiration Date: _____ Security Code: _____
 Signature: _____

How did you hear about the event? _____
 Please contact me about events & volunteer opportunities including the 2022 Dining Out For Life® event
 Please add me to your mailing list