



Take a Walk in Her Shoes

benefiting Community Partnership for Homeless



SATURDAY, MAY 8, 2010
THE VICEROY HOTEL MIAMI
2:00 p.m.—5:00 p.m.

Kindly respond by May 1, 2010.

Date: _____

Name _____ Company Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Please reserve the following:

____ VVP Tickets (\$200-limited availability)

____ Cabana Tickets (\$100-limited availability)

____ Individual Tickets (\$75)

Tickets will not be mailed, but rather your name will be on the guest list when you check in. Tickets can also be purchased online at www.cphi.org.

Method of payment (Check one): Visa MasterCard AmEx Check (payable to *Community Partnership for Homeless*)

Please charge \$_____ to my credit card.

Account number _____ Exp ____/____

Name as it appears on card: _____ Code _____

Please send to: Community Partnership for Homeless
1550 North Miami Avenue, Miami, FL 33136
ATTN: Lauren Gutierrez
Phone: (305) 329-3004 Fax: (305) 329-3051
Email: lgutierrez@cphi.org