

# 30<sup>TH</sup> ANNUAL BISHOP'S PRO-LIFE DINNER

MARCH 25, 2023 | RENAISSANCE DALLAS-ADDISON

Benefiting the Catholic Pro-Life Community | Respect Life Ministry of the Diocese of Dallas

[www.prolifedallas.org](http://www.prolifedallas.org) | 972-267-LIFE (5433) | [cpcl@prolifedallas.org](mailto:cpcl@prolifedallas.org)

<b>Champion of Life</b> <i>Help all our ministries <b>protect life</b> from womb to tomb!</i>	\$50,000 table (up to 20 guests)	Priority seating; may request to sit with featured / VIP guest(s); tickets for all table guests to private reception; wine served with dinner; two complimentary rooms at Renaissance Dallas-Addison; 5 complimentary valet passes.
<b>30 Year Defender of Life</b> <i>Help our frontline ministries <b>Cherish the gift of LIFE!</b></i>	\$30,000 table (10-12 guests)	Priority seating; tickets for all table guests to private reception; wine served with dinner; two complimentary rooms at Renaissance Dallas-Addison; 3 complimentary valet passes.
<b>Guardian of Life</b> <i>Help our education ministries <b>build a culture of LIFE!</b></i>	\$10,000 table of 10	Priority seating; tickets for all table guests to private reception; wine served with dinner; one complimentary room at Renaissance Dallas-Addison; 2 complimentary valet passes.
<b>Advocate for Life</b> <i>Help our outreach ministries <b>advocate for the right to LIFE!</b></i>	\$5,000 table of 10	Priority seating; tickets for all table guests to private reception; wine served with dinner; 2 complimentary valet passes.
<b>Protector of Life</b> <i>Help the CPLC <b>save lives!</b></i>	\$2,500 table of 10	Priority seating; wine served with dinner; 1 complimentary valet pass.
<b>Life Patron Table</b>	\$1,500 - Early Bird Special	Table of 10 (cash bar available). Price increases to \$1600 after February 24, 2023.
<b>Individual Ticket</b>	\$160 each	1 seat

(Please note: descriptions of tables do not indicate directed giving; proceeds from table purchases are unrestricted.)

Volunteer student tables (\$750) may be reserved on request to 214-931-4426 / [youth@prolifedallas.org](mailto:youth@prolifedallas.org).

\_\_\_ Total Tables \_\_\_ Total Guests Name for Table Sign / Program Book: \_\_\_\_\_

Any specific requirements for guests?	How many?	Comments
Special menu (i.e. vegetarian, food allergy)		
Wheelchair or highchairs?		
Headsets for live Spanish translation?		

- ☐ I would like to donate \$\_\_\_\_\_ for dinner scholarships.
- ☐ I would like to donate \$\_\_\_\_\_ to support the work of the Catholic Pro-Life Community.
- ☐ I would like to buy \_\_\_\_\_ raffle tickets at \$30 each, 4 tickets for \$80, or 8 tickets for \$125.
- ☐ I would like to provide event underwriting or sponsor the program book. **Please contact me.**

Total Amount Enclosed: \$ \_\_\_\_\_ ☐ Check ☐ Cash

Visa/MC/AmEx/Disc: \_\_\_\_\_ Exp Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_ Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_ Parish: \_\_\_\_\_

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

**Registrations requested by March 15, 2023.** Tables and seats are assigned when payment is received. Dinner tickets will not be mailed. Please provide **names and emails of additional guests on the back of this form**, via our website, [www.prolifedallas.org](http://www.prolifedallas.org), in an email to [reservations@prolifedallas.org](mailto:reservations@prolifedallas.org), or call 972-267-LIFE (5433).

**Please send your check or credit card information and this form to:**

Catholic Pro-Life Community, P.O. Box 803541, Dallas, TX 75380

**Or, form may be faxed to:**

972-385-3851

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MARCH 25, 2023 | HOTEL RENAISSANCE DALLAS-ADDISON

## Guest List

\*\*Please provide an email address for each guest so they may participate in advance check-in. All guests with an email address will receive an individual email notification with their table number in advance of the dinner; they will not need to check in at the event. **NOTE:** Table purchase may be made before all guest names are available.

**Table Standard Name:** \_\_\_\_\_ **Contact Name:** \_\_\_\_\_

**Contact email:** \_\_\_\_\_ **Contact phone:** \_\_\_\_\_

Guest #1:		Guest #6:	
Email:		Email:	
Phone:		Phone:	
Address:		Address:	
City, State Zip:		City, State Zip:	
Guest #2:		Guest #7:	
Email:		Email:	
Phone:		Phone:	
Address:		Address:	
City, State Zip:		City, State Zip:	
Guest #3:		Guest #8:	
Email:		Email:	
Phone:		Phone:	
Address:		Address:	
City, State Zip:		City, State Zip:	
Guest #4:		Guest #9:	
Email:		Email:	
Phone:		Phone:	
Address:		Address:	
City, State Zip:		City, State Zip:	
Guest #5:		Guest #10:	
Email:		Email:	
Phone:		Phone:	
Address:		Address:	
City, State Zip:		City, State Zip:	