



life without breast cancer.™

\_\_\_\_\_ Yes, I am a survivor and am delighted to attend

\_\_\_\_\_ I will be bringing a guest. Enclosed is my check for \$30.00  
(make checks payable to Susan G. Komen for the Cure®)

\_\_\_\_\_ Enclosed is my donation to Susan G. Komen for the Cure®

\_\_\_\_\_ No, I am not able to attend, but please keep me on the list

\_\_\_\_\_ Please remove me from the list

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

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

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

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



**Please RSVP by April 30, 2009**