

A MOVEABLE FEAST $^{\text{\tiny{TM}}}$ HOST COMMITMENT AGREEMENT

Event Date: Saturday, September 9, 2023

Host Name			
Address	City	State	Zip
Phone (Home)	Phone (Cell)	Phone (Office))
Name of Dinner			
Total number of dinner gu	uests including host/s		
Brief description of dinne	r menu:		
	o commit to hosting a fabulous dinne		
Host Signature			
the event, you will receive	expenses for providing this dinner to an "in-kind gift form" from the Deve ete this form, estimating your expens will generate a receipt.	elopment Director at B	lue Sky
C: I			

Sincerely,

Gina Maione Earles

Executive Director

gearles@blueskybridge.org

Aina M. Earles