



Greek American Rehabilitation &
Care Centre invites you to

*Fashion
with Flair*

Thursday, April 18, 2024

Cocktails: 6:00 pm | Dinner and Fashion Show: 7:00 pm



Chateau Ritz
9100 N. Milwaukee Ave., Niles, Illinois

Sponsored By:

Anthony and George Diamandakis | Terry and Suzan Athas | Calamos Investments
Cameo | Fresh Farms International Market | Alexander and Kathryn Gianaras
Greek American Restaurant Association | Demetrios and Marianne Logothetis
Peter and Ethel Parthenis | Peter and Brenda Venetos
Power Risk Management & Insurance

Chairladies: Teddi Galanis and Terri Mikuzis

a wholly-owned subsidiary of Greek American Health Services Foundation

FASHION WITH FLAIR

FASHION SHOW DINNER

Thursday, April 18, 2024 • Chateau Ritz, Niles, IL

PROGRAM BOOK SPONSORSHIP FORM

I WILL SUPPORT THE CENTRE BY BEING A SPONSOR:

- Orchid Sponsor - \$5,000 (Includes 1 table of ten)
- Rose Sponsor - \$2,500 (Includes 5 tickets)
- Gardenia Sponsor - \$1,000 (Includes 2 tickets)
- Lily \$500 Tulip \$100
- Jasmine \$300 Daffodil \$_____ (other)



TICKET RESERVATIONS

RESERVATIONS ARE CONFIRMED ONLY WITH PAYMENT:

Please reserve _____ seat(s) at \$125.00 per person by April 8th (table of ten)

Please reserve _____ seat(s) at \$150.00 per person after April 8th (table of ten)

*Meal Selection: Shrimp or Chicken**

**Must be submitted with reservations, please see back of this card*

PLEASE SUBMIT CHECKS & FORMS BY APRIL 8, 2024

PLEASE PRINT YOUR NAME AS YOU WISH TO APPEAR IN THE LISTING OF THE PROGRAM BOOK

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

____ Enclosed is my check payable to: **Greek American Health Services Foundation**

____ Please charge my credit card: __ Visa __ MasterCard __ American Express __ Discover

CARD NUMBER

CCY CODE

EXPIRATION DATE

CARDHOLDER NAME

SIGNATURE

No, I am unable to attend the Fashion Show Dinner but wish to make a contribution payable to: *Greek American Health Services Foundation*

Total amount enclosed: \$_____

RESERVATIONS

PLEASE LIST EACH ATTENDEE'S NAME
AND MEAL CHOICE

		Shrimp	or	Chicken
1.	_____	<input type="checkbox"/>		<input type="checkbox"/>
2.	_____	<input type="checkbox"/>		<input type="checkbox"/>
3.	_____	<input type="checkbox"/>		<input type="checkbox"/>
4.	_____	<input type="checkbox"/>		<input type="checkbox"/>
5.	_____	<input type="checkbox"/>		<input type="checkbox"/>
6.	_____	<input type="checkbox"/>		<input type="checkbox"/>
7.	_____	<input type="checkbox"/>		<input type="checkbox"/>
8.	_____	<input type="checkbox"/>		<input type="checkbox"/>
9.	_____	<input type="checkbox"/>		<input type="checkbox"/>
10.	_____	<input type="checkbox"/>		<input type="checkbox"/>

PLEASE NOTE ANY DIETARY RESTRICTIONS

PLEASE RESPOND BY: **APRIL 8, 2024**

IN THE ENCLOSED ENVELOPE

FOR MORE INFORMATION

PLEASE CALL **224-434-0509**

OR VISIT US: WWW.GREEKAMERICANCARE.ORG

Name _____

Email _____

Telephone _____

***Please indicate the number of tickets
for each prize choice:***

___ Miami Experience ___ Christian Louboutin Purse

___ Lagos Caviar Bracelet ___ Lalaounis Signed Scarf

___ RPM Seafood Dinner ___ \$1,000 Cash Prize

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RAFFLE PRIZES

1 for \$25 • 3 for \$50 • 7 for \$100

- **Miami Experience:** Two (2) Night Stay at FAENA Hotel Miami Beach, partial ocean view junior suite, including breakfast for 2 guests and a \$400 Airline Voucher
- **Lagos Caviar Bracelet:** Sterling silver and three 18K yellow gold stations beaded bracelet (23mm wide)
- **RPM Seafood Dinner:** VIP dining experience for eight (8) with a chef curated menu and wine pairings
- **Christian Louboutin Purse:** Leche Cabachic small grained leather with spikes
- **Lalaounis Signed Scarf:** Museum collection signed silk scarf with depictions of porcelain plates, vieux - Paris 19th century
- **\$1,000 Cash Prize**

*Each ticket can be entered for any of the above prizes.
Indicate your prize selection accordingly.*

Winner need not be present

