



RSVP and Sponsorship Form

YES! Thank you. I/we plan to attend. Please reserve _____ seat(s)

Your Information

Full Name: _____

Company: _____

Address: _____

City, State, ZIP: _____

Telephone: _____ Email: _____

I will not be attending the Dinner, but please accept the contribution of
\$_____.

Method of Payment:

Payments made with checks in the US: _____ (Mail check payable to AHI to:
AHI, 1220 16th Street, NW, Washington, DC 20036)

Deposit to **PNC Bank**, 1800 M Street, NW, Washington, DC 20036

Customer Name: American Hellenic Institute

Account #: 5308642694 | **Routing #:** 031000053 | **BIC/Swift Code:** PNCCUS33

Please charge my contribution of \$_____ to my credit card:

VISA MC AMEX Today's Date ____/____/____

Cardholder Name: _____

Credit Card number: _____

Expiration Date: ____/____ Security Code _____ Billing zip Code _____

Thank you for your support!

For dinner reservations, please RSVP by Friday, April 28, 2023

For information, contact Sylvia Gavalla at 6932 623904 (between 9:30 & 11:00 am) or ahiathens@gmail.com
or contact Nick Larigakis at 202-785-8430 or nlarigakis@ahiworld.org

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