

HOST/HOSTESS NAME

TOTAL # AT YOUR TABLE ______

ROLE

(host, co-host or guest)	LAST NAME	FIRST NAME	ADDRESS	TELEPHONE	EMAIL

Table Host Set-Up: Saturday, Sept. 21, 10am-2pm. Please be sure to include host/hostess and spouse(s) in the above list of table guests.

NOTE: You can fill out this form electronically on the Table Host Website: www.anchorcenter.org/onlinerosterform2024

Otherwise, please email this completed form to <u>swippel@anchorcenter.org</u>, fax to 303.377.9744 or mail to 2550 Roslyn Street, Denver, CO 80238 by <u>August 19th</u>.