

29TH ANNUAL

FALL BANQUET

ALLEN COUNTY WAR
MEMORIAL COLISEUM

OCTOBER 12TH, 2026



KAYLEIGH MCENANY

COMMENTATOR AND FORMER WHITE HOUSE PRESS SECRETARY

1. Please indicate the total number of tables you are reserving:

Tables: \$400 per table for 8 people (parking included in ticket cost)

I am reserving ____ table(s) for the Banquet.

2. Please indicate your reservation option:

I am hosting the table(s). I will fill the table and each guest will pay individually.

I am sponsoring the table(s). I will fill the table and pay for all tickets.

I am sponsoring a table but would like RLNI to fill the ____ extra seats I am not using.

3. Total amount due: \$ _____

4. Please indicate your payment option:

My check is enclosed - made payable to RLNI ETF.

I will collect individual payment and turn in full payment.

Please charge my card # _____ Exp __/___ CVV _____

Name: _____

Sponsorship Name (for display): _____

Address: _____

City, State, Zip: _____

Daytime Phone: (____) ____ - ____

Email Address: _____

Note: Please send guest names to Phoebe at phoebe@ichooselife.org by **October 2nd**. For more information call 260.471.1849, email Phoebe, or visit www.ichooselife.org/banquet

Forms with checks: RLNI ETF, 3106 Lake Ave, Fort Wayne, IN 46805

