

# Seat Reservation Form

**Yes, I want to support the Chula Vista Public Library!**

**Enclosed is my tax-deductible donation of \$100. Please include the following wording on my chair:**

First line (up to 15 characters, including spaces): \_\_\_\_\_

Second line (up to 15 characters, including spaces): \_\_\_\_\_

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

Phone or email address: \_\_\_\_\_

Please make your check payable to FCVL and return to: FCVL, P.O. Box 393, Chula Vista, CA 91912