

COLLEGE OF ARCHITECTURE FRIENDS ASSOCIATION

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Join us for a unique opportunity

Architecture College
Lincoln, NE

Designed by:
UNL College of Architecture Alumni

\$25 per Member/Student
\$30 per Non-member

Name: _____
(Please Print)

Guest: _____
(Please Print)

CAFA membership - \$20 for 1 year
(see enclosure)

Return RSVP and payment by 03.30.2009 to Geri Wesely at:
College of Architecture
Rm. 210 Architecture Hall
P.O. Box 880106
Lincoln, NE 68588

Checks can be made out to:
University of Nebraska-Lincoln

Dinner Options:

_____ Chicken Santa Fe with fiesta rice,
(Qty) vegetables and mixed green salad.

_____ Sliced BBQ beef brisket with
(Qty) dill red potatoes, corn and
mixed green salad.

_____ Portabella mushroom with wild rice,
(Qty) roasted vegetable medley and
mixed green salad.

PLEASE RETURN THIS HALF WITH PAYMENT

You're invited to the CAFA Awards Banquet

FRIDAY | 7:00 - 10:00PM
APRIL 3rd | College of Architecture
Lincoln, NE

We will be honoring the following individuals:

- Distinguished Alumni
Architecture | Larry Jacobsen, Scott Killinger
Interior Design | Ross Greathouse
Planning | Becky Hanna, Dallas McGee
- Faculty Award of Excellence
Dr. N. Brito Mutunayagan
- Emerging Professionals | Sheila Elijah, Ed Vidlak
- Honorary Life Membership in CAFA
Mike Benck

APRIL 3rd
7:00 Cocktails / Student Work
in the Gallery
7:30 Dinner / Presentation

University of Nebraska Foundation Contribution Card

My Gift of:

\$ _____ is enclosed to support the
College of Architecture Friends Association(CAFA) #8386.
 (\$20.00 min. contribution required for CAFA membership)

My check for \$ _____ is enclosed, payable to the **University of Nebraska Foundation.**

Please charge \$ _____ to my: VISA MasterCard Discover American Express

 Card Number

 Exp. Date

 Signature (for credit card payment)

 Date

Name _____

Address _____

City _____ State _____ Zip Code _____

Email _____ Phone _____

I would like to become more involved in CAFA. Please have someone contract me to become involved.

My company _____
 will match this gift. The
 company form is enclosed.
 (If you, or your spouse, are
 employed by a company with
 a matching gift program, your
 gift could be increased. Contact
 your employer's personnel office
 for more information.)

I have already included the
 Foundation in my estate plans
 through my will, trust or life
 insurance.

Please send information
 about making a planned gift.

Campaign: LARAA08

Questions can be directed to:

Jennifer Ankerson, jennifer.ankerson@hdrinc.com

Look for our website coming soon!