



Bid by proxy form – Email to erika@angelsfostercare.org or Fax to (805) 884 0177

First and last name

Billing Address

City

State

Zip

Email

Phone Number

Get Away from it All

One night stay and breakfast for two at Four Seasons Resort The Biltmore Santa Barbara, plus a \$100 dining certificate to Olio e Limone Ristorante, plus two VIP passes good for 4 to The Magic Castle Cabaret.

Max amount \$ _____

Picnic with Friends

All-inclusive picnic for 10 with choice of platter Cheese, Mediterranean, Crudite, Seasonal fruit, or Charcuterie. Includes set up and take down of décor, small table, shade, and florals. Also includes 3 bottles of wine (Rose, GSM Red, & Chardonnay)

Max amount \$ _____

If I am the winning bidder, I authorize Angels Foster Care of Santa Barbara to make a one-time charge to my credit card in the amount of _____

Signature: _____

Credit Card Number _____

Exp. Date _____ Security Code _____

Angels Foster Care of Santa Barbara is a non-profit 501c3 organization. Federal Tax Id # 16-1749619
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