



Ninth Annual Atlanta Fundraising Dinner

Thursday, March 18, 2009 at 7:00 p.m.

Hilton Atlanta Northeast

5993 Peachtree Industrial Blvd

Norcross, GA 30092

Doors open at 6:45

Rainbow Omega, Inc. is a faith-based residential and vocational program for adults with developmental disabilities located in Eastaboga, Alabama. Our organization began in 1995 with two homes serving 16 residents. Since that time, our operations have grown exponentially. Today, we have 79 residents, eight group homes, a state-of-the-art medical care facility, five greenhouses, and a sheltered workshop.

In order to provide quality services at a reasonable cost for families, fundraising is done through grants from foundations, contributions from churches, local businesses, and individuals, and special events such as our annual dinner in Atlanta.

Please join us on March 18th for an inspirational evening with Amy Roloff. Born with dwarfism, Amy has overcome many obstacles in her life that the majority of people will never face. She leads a very well-rounded life from her home in Oregon as a wife and mother to four active teenagers. She and her family are featured on the TLC show "Little People, Big World" and have written the book "Little People, Big Values." We look forward to having Amy as our guest and hope you will be there to help us celebrate another successful year at Rainbow Omega.



Amy Roloff
Guest Speaker

Ninth Annual Atlanta Fundraising Dinner Order Form

Name: _____

Business or Organization (if applicable): _____

Mailing Address: _____

City, State, Zip: _____ **Phone #:** _____

- I would like to host a table of 8 people for \$350.00. I will invite the guests and will make sure that they know we will make an appeal for donations at the end of the evening.
- I would like to sponsor a table of 8 people for \$350.00 and have Rainbow Omega to fill the seats.
- I will not be able to attend, but please accept my gift in the amount of \$_____ to help Rainbow Omega provide services to adults with developmental disabilities.

Select payment preference: Payment Enclosed Send Invoice Credit Card/Debit Card

For Credit Cards, please complete the following information:

Charge my account for the following amount: \$ _____

Please Circle One: American Express Visa Master Card

Account #: _____ Exp. Date: _____

Authorizing Signature: _____

Please mail completed form to PO Box 740 Eastaboga, AL 36260.

For more information, please contact Andrea Wilson at 256-831-0919 x. 225 or at awilson@rainbowomega.org