

WINTER BOOK & AUTHOR - 2017

General Admission: \$65

Sponsor (Includes a reserved seat and your name in the program) \$100

Name _____ Chapter: _____
Address _____ City _____ Zip _____
Phone (day) _____ Phone (evening) _____ email _____

SEATING PREFERENCE: _____

DIETARY RESTRICTIONS MUST BE NOTED HERE: _____

PLEASE COMPLETE A SEPARATE FORM FOR EACH ATTENDEE

My payment for \$_____ is enclosed. **MY CHECK # _____ OR CREDIT CARD**

VISA MASTERCARD AMERICAN EXPRESS DISCOVER

Credit Card number: _____ Exp Date: _____ Sec Code # _____

Name exactly as it appears on the credit card: _____

Billing address: _____

Please submit this form with your payment to:

Hadassah Florida Atlantic, 5341 West Atlantic Avenue – Suite 305, Delray Beach, FL 33484

561-498-1012 floridaatlantic@hadassah.org

TICKETS ON SALE STARTING MONDAY, NOVEMBER 21, 2016 AT 9:30 A.M.

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