

Need an extra registration form? Print and complete this form.

Show _____

Date: _____ **Cost:** _____

Check: # _____

Additional Contribution: \$ _____

Amount encl \$ _____ **for** _____ **# people**

1. Name/address

2. Home Phone: _____

Cell Phone: _____

Email: _____

3. Pick-up Location:

___ West—Covenant Church Mineral Pt & Segoe Rd

___ Monona—South Towne Mall (near the old McDonald's)

___ East—Marshalls, 2117 Zeier Rd.

4. I wish to sit with: _____

5. Emergency Contact Name & Phone Number:

6. Additional Information: