

I/we will attend
 The 28th Annual Ursuline Parent Association
CRAB FEED & AUCTION

Name _____

Address _____

City _____ State _____ Zip _____

Email _____ Phone _____

Please Reserve:

of tickets

Friday, January 29th GYM SEATING _____ x \$50 = \$ _____

Friday, January 29th STUDENT CENTER _____ x \$40 = \$ _____

Saturday, January 30th INDIVIDUAL _____ x \$100 = \$ _____

Saturday, January 30th TABLE OF TEN _____ x \$950 = \$ _____

Absentee Bidder

Friday \$25 Saturday \$25 _____ x \$25 = \$ _____

Please send an Absentee Bidder Application to my email address

Donation

Please accept my donation to the President's Circle Fund = \$ _____

One bidder number
 will be given per
 individual or couple

TOTAL DUE = \$ _____

Enclosed is my payment of \$ _____

Check Charge: MC Visa Online Bank

Please make checks payable to UHS Parent Association

check to arrive
 5 business days

Cardholder Name _____

Card Number _____ Exp. ____/____ CVC _____

Signature _____ Date _____

No tickets will be sent. A confirmation will be sent to you via

Regular Mail or Email (please check one) at least two weeks prior to the event.

Please list each guest(s) name:

I will attend
 FRI SAT BOTH

Totals: Fri.____ Sat.____

If you would like to request seating with other guests who plan to send in their own reservations, please provide names here:
