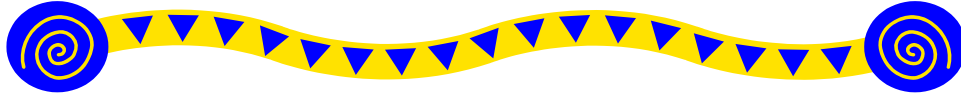


LVTAA NEW YEAR BALL REGISTRATION



Name: _____

Address: _____

Home Phone: _____

Cell Phone: _____

E-Mail Address: _____

Yes we will be attending _____

Number of Adults _____ \$125.00

Number of Children _____ \$50.00

Seating preference _____

*we will do our best to accommodate your request but can not guarantee.

We would like to include our student friends in this event. Student rate is \$85.00. We would like to make this more affordable for them by offering sponsorship opportunities. You may sponsor the whole or any portion this amount.

Yes I would like to sponsor a student \$ _____

Thank you for your continued support and we look forward to seeing you. Please send this form along with your check to:

LVTAA
PO BOX 5375
BETHLEHEM, PA. 18015