



3rd Annual De*Frost Party Reservation

Name of individuals attending: (For additional names please use the back of this form)

1. _____
2. _____
3. _____
4. _____

Please mail my tickets to:

Name: _____

Address: _____

In case we need to contact you about the tickets, please provide us with

Phone: _____ Email: _____

Not a member? Join SouthholdVOICE today!

Name and address same as above If not, please fill in below.

Name: _____

Address: _____

Phone: _____ Email: _____

New Member: Household \$35 \$ _____

Ticket Order: Please reserve _____ tickets at \$50 \$ _____

I am not able to attend but would like to make a donation of \$ _____

Total Enclosed \$ _____

Make check payable to SouthholdVOICE, Inc.

Mail to SouthholdVOICE Inc. PO Box 996, Southold NY 11971

Please Note: If purchasing tickets by mail - your tickets will be mailed out by January 16th. For reservations received after this date, your tickets will be at the door on January 23rd