

*Pediatric Lyme Disease Foundation
A Night at the Theatre
Saturday, June 1, 2019
Ticket Reservation Form*

Name of Requestor: _____

Number of Tickets: _____

Kiwanis Club Affiliation (if applicable): _____

Division Affiliation (if applicable): _____

Phone Number: _____

Email Address: _____

The cost per ticket is \$35 a person. Please arrive by 7:30 p.m. since we are a large group. Show starts at 8 p.m. If coming to the reception prior, please arrive by 7 p.m. Please RSVP by May 15, 2019 if you are able to attend. Tickets will be distributed the night of the event.

Please direct the completed form with enclosed check made payable to "Pediatric Lyme Disease Emergency Relief Fund Foundation" to the attention of:

Jeanne M. Egan-Canning
Board Member/Event Organizer
30 Pearsall Ave
Unit 3D
Glen Cove, NY 11542

If you have any questions, please feel free to contact Jeanne at post2004@att.net or 516-353-8325. If you are interested in sitting next to someone during the performance that will be mailing their request in separately, please let us know and we will try to accommodate your request. We will also select payment the night of the performance.