Registration form for the 19th Annual UBP Disabled Hunters Program Banquet April 15, 2023 at CJ Hummel's Restaurant

Note: If you are registering more than 10 people for the banquet, please use a second form. A check or valid credit card must accompany your request for tickets.

<u>Head of Table Information</u> ~ Registr	ration confirmation will b	e emailed to this pe	erson.			
Name:						
Address:			~ .			
City:	State:		_ Zip Cod	e:		
Email:	Phone:					
Additional Attendees ~ Names are no	eeded to issue bidder num	bers.				
Name:		Name:				
Email:	·	Email:				
Phone Number	·	Phone Number				
Name:	·	Name:				
Email:		Email:				
Phone Number		Phone Number				
Name:		Name:				
Email:		Email:				
Phone Number		Phone Number				
Name:		Name:				
Email:		Email:				
Phone Number		Phone Number				
Name:		Adu	lt Tickets	\$55.00	= \$	
Email:		Child (4-12		\$40.00	= \$	
Phone Number			Enclosed		= \$	
For Wheelchair accessible seatin for your table. Thank you.	g, please indicate the nur	nber of wheelchai	r accessibl	le seats the	at will b	be required
Registrations Postmarked by Marc	ber cards will be at your h 15 th will be available fo Checks payable to: UBP	or the early bird d	lrawing –		0 Visa	Gift Cards
VISA / MC / Discover:		Expiratio	n Date: _	/	CCV	7
Authorized Signature:						

Please send your registration form and check/credit card to: Disabled Hunters Program, PO Box 481, Emmaus, PA 18049