

FATHER DAUGHTER GALA
REGISTRATION FORM

Parent Name: _____

Child Name: _____

Addition child name(s): _____

Address: _____

Phone Number: _____

Email address: _____

Grade/School/Teacher Name: _____

Would you like to volunteer and be on the Dance committee? _____

Pre-ordering silk flower corsage? YES / NO \$10 to be paid at pick up the night of dance

Number of people attending: _____ (\$50 couple, \$5 for each additional daughter)

Payment (circle one) CASH CHECK – Checks payable to Lynnfield Recreation

Please make sure all lines on form are properly filled out so we can make sure you get the photo of your daughter once they are available

**If registering by mail:
Please mail forms with payment to:
55 Summer Street
Lynnfield, MA 01940**

**All tickets must be purchased by 2/3/2010
Questions please call Stacey (781)334-9488**