



THE TWENTIETH ANNUAL

# Ladies' Night Out

*Tickets*



# Tickets



Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

E-mail \_\_\_\_\_

No. of Tickets \_\_\_\_\_ x \$100.00 (per ticket), Total \$ \_\_\_\_\_

*Please list names of people for whom you are purchasing tickets:  
{Up to 14 people per table}*

☐ Seat me where available.   ☐ Seat me with the following guests:

*Seating requests will be honored upon payment in full of each guest.*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

No. of Raffle Books \_\_\_\_\_ x \$25.00 (per book), Total \$ \_\_\_\_\_

*Please enclose stubs*

*I cannot attend but will contribute \$ \_\_\_\_\_*

**Please respond by Friday, October 7th.**

*All contributions are tax deductible (except \$50 per Ladies' Night Out ticket).  
The Manhasset Women's Coalition Against Breast Cancer  
is a Section 501 (c) (3) charitable organization.*