

Let the Good Times Roll ... 15th Anniversary!

REGISTRATION FORM

Event Date – October 21, 2017

Deadline for 'All Inclusive Tickets' is **October 2, 2017**

PLEASE PRINT :

NAME: _____

ADDRESS: _____ POSTAL CODE: _____

PHONE: _____ E-MAIL: _____

	TICKET PRICE	EXTENDED PRICE
WORKSHOP/BUFFET DINNER/DANCE Both Veg and non Veg meals include salads, garlic bread, cake, fruit, tea/coffee. Please check which box applies to you: <input type="checkbox"/> Chicken parmesan with penne OR <input type="checkbox"/> Vegetarian: Stuffed Pepper with California vegs. The meal will be catered by an external caterer.	\$55.00 per person/\$65 after Sept 21 <i>(Deadline to order meals is Oct 2)</i> Wine costs \$19 per bottle _____ # of Red _____ # of White	
<i>There is limited space so registration for the following is dependent upon space available. We will refund your ticket if 'All Inclusive' registration reaches the maximum number allowed.</i>		
WORKSHOP/DANCE	\$45 per person/\$50 after Sept. 21	
WORKSHOP ONLY	\$35 per person/\$40 after Sept 21	
DANCE ONLY	\$12.50 per person	
STEP SHEET BOOKS \$4 each	Number -- _____ x \$4 =	
<i>Please make cheque payable to Vivienne Scott-Smietana</i>		<u>TOTAL</u>
<i>If possible I would like to sit with:</i>		

You are welcome to bring your own non-alcoholic drinks/snacks -- Jugs of water/coffee/tea will be available

Please mail checks with payment to:

Vivienne Scott (Let The Good Times Roll ...), 177 Havelock Street, Toronto, Ontario M6H 3B7

Please double-check that your cheque is cashed as that will count as your receipt.

No refunds will be possible after October 2, 2017

Your ticket(s) will be waiting for you at the door with our smiling faces!!

Please note that doors will open at 11:30 and the workshop will begin at 12 noon.

Release: I, the undersigned, agree to hold the organizers of this event and all their agents harmless from all suits, claims, or demands of every kind arising out of, and in conjunction with this event. I certify that I am 18 years of age or older. (Applies to legal guardian if person is under 18 years of age.)

SIGNATURE: _____ DATE: _____