



ComedyCures Casino and Comedy Night - July 16, 2008

Page 1 of 2

Ticket

of Tickets _____ Individual Tickets \$150.00 Per Person Total = _____
(TAX-DEDUCTIBLE TO THE EXTENT ALLOWED BY LAW)

Total Cost = _____

Name of Person Making the Reservations _____

Address _____

City _____ State _____ Zip _____

Phone _____ Cell _____

Email _____

Method of Payment _____ MasterCard _____ Visa _____ Amex

_____ Cash _____ Discover _____ Check Check # _____

Credit Card Information

Name on Credit Card _____

Billing Address _____

City _____ State _____ Zip _____

Billing Phone # _____ Email _____

Credit Card # _____ Security # _____
Amex-4 digits all other 3 digits

Expiration Date: _____

Office Use Only

Information Taken by _____ Date _____

Processed by _____ Date _____



Name of Person Making the Reservations _____

Name of People Attending

	Prefix	First Name	Last Name
1	_____	_____	_____
2	_____	_____	_____
3	_____	_____	_____
4	_____	_____	_____
5	_____	_____	_____
6	_____	_____	_____
7	_____	_____	_____
8	_____	_____	_____
9	_____	_____	_____
10	_____	_____	_____

"We bring joy, hope, laughter and therapeutic entertainment programs to children and adults living with illness, depression, trauma & disabilities."



Fax

To: Patti Roiz	From:
Fax: 201-227-8411	Fax:
Phone: 201-227-8410	Phone:
3 Pages (Including Cover)	Date: