



# Reservation Form

Yes! We'll be there!

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

**Reservations will be held for check-in at the door on February 26.**

	Quantity	\$
Adult Tickets @ \$20 each		
Student/Senior Citizen Tickets @ \$10 each		
<b>TOTAL</b>		

We can't attend, but have enclosed a donation in the amount of \$ \_\_\_\_\_

**Please make check payable to A Taste of Lower Merion.**

**Mail to:**

A Taste of Lower Merion  
Lower Merion High School  
245 East Montgomery Avenue  
Ardmore, PA 19003

Your contribution is tax-deductible as allowed by law.