



Please complete and print this form, then send it with your mail-in payment.

Full Name: *

First Name Last Name

E-mail: *

Contact Number: *

Area Code Phone Number

Number of Tickets:

See guide below for price calculations

# of tickets	1	2	3	4	5
Cost	\$45	\$90	\$135	\$180	\$225

**Houston Alumnae Chapter of Delta Sigma Theta Sorority, Inc
P.O. Box 2642
Houston, Texas 77252-2642**