

SHA SPRING SPORTS BANQUET REGISTRATION FORM

Sunday June 6th at 2:00pm (Doors open at 1:30pm) in Gym

Athlete Name: _____ Grade_____ Homeroom_____

Sport:_____

Number of Attendees:

Athlete : FREE

1st Guest:(@\$23.00) \$_____

Additional Guests :
(@\$15ea)

No. Guests_____ x \$15 = \$_____

TOTAL ENCLOSED: \$_____

Please return this form to the SHA Office with payment by Friday May 28th
Make payment payable to SHAFC (SHA Father's Club)

Any questions contact Mario Ceste at m.cestes@snet.net or 203-494-2160.