



RESERVATION DEADLINE - JANUARY 27TH

___ Please reserve ___ tickets at \$50 per person.
Total: \$_____

___ Would like to sponsor a teacher/staff member.
Please reserve _____ staff tickets at \$40 per person.
Total: \$_____

___ Sidelined, but wish to donate \$_____.



___ Enclosed is a check made payable to AHS PTO

___ Would like to pay by ___ VISA ___ M/C

Card Number _____

Signature (required) _____

Name: _____

Street: _____

City: _____ State: _____ Zip: _____

Phone: _____

E-mail: _____

Please mail to:
Arcadia High School PTO
Anne Keenan
4725 East Calle Del Medio
Phoenix, Arizona 85018