

Phoenix Center

Registration

TEAM NAME _____

Firefighters Lake Club * February 27, 2010 * 7:00 p.m.

Name 1: _____

Name 2: _____

Name 3: _____

Name 4: _____

Name 5: _____

Name 6: _____

Name 7: _____

Name 8: _____

Name 9: _____

Name 10: _____

Send Registration Form To:

Phoenix Center Trivia Night

109 E. Lawrence Ave.

Springfield, IL 62704

Or

Email to: jcool.phoenix@comcast.net

\$10 per person

PAYMENT

Cash Enclosed

Check Enclosed - Make Checks Payable to: Phoenix Center

Master Card VISA

Card Number: _____

Expiration Date: _____ 3 digit Security Code _____

FOR MORE INFORMATION CALL 217-528-5253

Trivia Night

