



GROUP SALES RESERVATION FORM

Race DATE to attend: _____ Today's DATE: _____

GROUP NAME: _____

Group Leader: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE(W): _____ EMAIL: _____

PHONE(C): _____

GROUP MILITARY EVENT SUITE 118 Bar and Grill

TICKETS @ Adult \$12ea _____ Youth \$5 ea _____ Child \$1 ea _____

PAYMENT INFO

CHECK: _____

CASH: _____

CREDIT CARD: VISA MASTERCARD AMEX
NUMBER: _____ EXP. DATE: _____ Code _____

Billing address _____

INITIALS OF PERSON TAKING RESERVATION: _____

COMMENTS:

Section

TV announcement

PA announcement