

A Red Carpet Event

9TH ANNUAL LEBANON HEART BALL ~ FEBRUARY 25, 2012 ~ LEBANON COUNTRY CLUB

Name: _____

Address: _____

Phone: _____ Email: _____

Please check all that apply:

Heart Ball Tickets: \$125 x _____ seats = _____

Please accept this donation for the Open Your Heart Special Appeal: _____
Donors who contribute \$100 or more will have their name listed in the program.

Payment type: Check payable to the American Heart Association
 Credit Card (circle one): Visa MasterCard Amex Discover

Name on Card: _____ Signature: _____

Card #: _____ Exp.: _____ CW: _____

SEATING IS LIMITED. PLEASE REPLY PROMPTLY.



SEATING

___ Please have the committee seat me.

___ I have arranged to be seated at the table of: _____

Names & addresses of others in my party:

The official registration of the American Heart Association, Inc. may be obtained from the Pennsylvania Department of State by calling toll free within Pennsylvania 800 732-0999. Registration does not imply endorsement.

The fair market value of the benefit(s) received from the Heart Ball event is \$70. The portion of this ticket deductible as a charitable contribution is \$55. For further information, contact the American Heart Association, Lebanon Division Office by calling 717-207-4266.