



# 70 Years of Excellence GALA CELEBRATION Registration

**PLEASE RETURN COMPLETED FORM BY NOVEMBER 1, 2024**

Name \_\_\_\_\_

Address \_\_\_\_\_

City, St, Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

No. of Tickets \_\_\_\_\_ Sponsorship Level \_\_\_\_\_

Guest Names \_\_\_\_\_  
\_\_\_\_\_

Amount Enclosed \$ \_\_\_\_\_

We can not participate, but wish to donate  
\$ \_\_\_\_\_ to The Arc Foundation in honor of  
\_\_\_\_\_

In-Kind Donation item \_\_\_\_\_  
Value \$ \_\_\_\_\_

Please contact me as someone in our party has a dietary restriction.

**Mail your registration with payment made payable to:**  
The Arc Foundation, PO Box 389, Washington, NJ 07882  
**For online registration visit: [arcwarren.org/70Years](http://arcwarren.org/70Years)**