



Registration Form

Name _____

Company Name _____

Address _____

Phone # _____

Email _____

of Admission Tickets @ \$100 Each _____

Sponsorship (circle)

Table \$1250

Reception \$750

Event \$500

Total Enclosed: \$ _____

Please make checks payable to The Chamber of Commerce of the Mastics & Shirley and mail this form with payment to:

The Chamber of Commerce of the Mastics & Shirley
P.O. Box 4
Mastic, NY 11950

or pay online at <https://masticshirleychamber.org>