

ANNUAL GALA



Karen Organization of Minnesota
 ကိုရီးယားအမျိုးသမီးအဖွဲ့အစည်း
 ညွှန်ကြားမှုဦးစီးဌာန၊ ကရင်ပြည်နယ်၊ ရန်ကင်းမြို့နယ်၊ ရန်ကင်းမြို့၊ ကရင်အမျိုးသမီးအဖွဲ့အစည်း

2018 INDIVIDUAL REGISTRATION FORM

Please complete all fields in this form and return the completed form to the Karen Organization of Minnesota by Monday, October 1st to reserve your tickets to KOM's Annual Gala on October 25th. Kindly mail your completed registration form and check to:

Attn: Frank Hennick, Karen Organization of Minnesota, 2353 Rice St., Suite 240, Roseville, MN 55113.

Contact Information			
Attendee Name:			
Mailing Address:			
City:	State:	ZIP:	
Phone Number:	Email Address:		

Ticket Information			
Category	Number of Tickets	Ticket Price Subtotal	Payment Method: (Please check one)
Adult (\$70/ticket*)			<input type="checkbox"/> Check enclosed (Please make checks payable to Karen Organization of Minnesota with 2018 Gala in the memo line.) <input type="checkbox"/> Credit card (Make a secure payment via PayPal at: https://www.mnkaren.org/event/10th-anniversary-gala/)
Senior (65+)/Student (\$55/ticket)			
TOTAL			
<input type="checkbox"/> I cannot attend, but please accept my donation of \$ _____			

Table Information			
Guest Name:	Check if Vegetarian:	Guest Name:	Check if Vegetarian:
Additional comments/accommodation needs:			

Thank you for your support of the Karen Organization of Minnesota! You will receive a receipt for your tax-deductible contribution.