



**REGISTRATION FORM**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

**List names of each guest for which you are paying:**

Guest 1 \_\_\_\_\_

Guest 2 \_\_\_\_\_

Guest 3 \_\_\_\_\_

Guest 4 \_\_\_\_\_

Guest 5 \_\_\_\_\_

Guest 6 \_\_\_\_\_

Total number attending:  x \$30.00 = \$\_\_\_\_.00

Total amount enclosed: \$\_\_\_\_.00

**Make checks payable to "PolishYoungstown"**  
**Mail to PolishYoungstown:**  
**2213 Fifth Avenue • Youngstown, Ohio 44511**  
**OR REGISTER ONLINE @ [www.polishyoungstown.com](http://www.polishyoungstown.com)**