



# Magic Cup Family Bingo REGISTRATION



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

Sponsor Email: \_\_\_\_\_

Sponsor Telephone Number: \_\_\_\_\_

## Guests Attending the Event

Cards are \$7.00 per person, includes 1 card.

	# of Cards	# of U-pick-ems
1. NAME: _____	<input type="text"/>	<input type="text"/>
2. NAME: _____	<input type="text"/>	<input type="text"/>
3. NAME: _____	<input type="text"/>	<input type="text"/>
4. NAME: _____	<input type="text"/>	<input type="text"/>

Additional Bingo Cards (\$7.00 each): \_\_\_\_\_

Total U-Pick-Ems (\$2.00 each): \_\_\_\_\_

**\*\* All sales are FINAL \*\***

Receipt Number

Staff Initials