

Louisiana PTA  
Children's Award Luncheon  
Reservation Form  
April 10, 2010 Crowne Plaza Hotel

**DEADLINE: Form and payment must be postmarked by March 15, 2010**

Winner's Name: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

\_\_\_\_ Yes, I will be attending the luncheon.

\_\_\_\_ No, I will not be unable to attend the luncheon

**Each winner will receive one complimentary ticket.**

Number of additional tickets ..... \_\_\_\_\_

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

(Number of Tickets x \$18.00)

**Make Checks payable to: Louisiana PTA**

**Please return this form and payment to:**

Margie Rayburn  
8305 Forest Cove Drive  
Shreveport, Louisiana 71107

**TICKETS WILL BE HELD FOR YOU AT THE DOOR.**

If you have questions about whether your  
form and payment were received, call  
Margie Rayburn at: 318-929-5313 (H)  
318-458-4179 (C)

