

Please mail this form and your check to:

Tri-County Music Association, Inc.  
P. O. Box 414  
Rochester MA 02770

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*Please make all checks payable to "The Tri-County Music Association, Inc."*

Name \_\_\_\_\_

Number of Guests \_\_\_\_\_, (including yourself)

Telephone \_\_\_\_\_

E-mail \_\_\_\_\_

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

\$50 per person      \$400.00 table of eight

*This year, all tickets will be held under the orderer's name and seat locations will not be reserved.  
We need to receive your request by JUNE 10th to ensure your reservation.  
Please mail this card and your check in the enclosed envelope.*