LET THEM EAT CAKE

A Variety of Childhood Fun and Fantasy

Sunday, March 5, 2017

Registration Information

First Name Last Name

Address

City State Zip

Phone Fax

Company/School Name

Email

Credit Card

American Express ☐ Visa ☐ MasterCard ☐ Discover ☐

Exp. Date _____ Signature _____

Check (payable to Variety – the Children's Charity) Enclosed ☐

Donation Amount _____ ($150 per cake entered) Student ☐

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Worcester, PA 19490
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