

Crown Bound Pageants

Asheville Mardi Gras Pageant

Please mail your reservation form and your deposit of \$25 to CBP PO Box 456 Mayodan NC 27027.
Please **no personal checks!** Please make Money Orders Payable to **Gina Ingle, Director.**

Date: **Saturday, March 17, 2012**

Pageant Location: **Asheville, NC * Crowne Plaza Resort**

Check-In Time: 10 am * Pageant Time: 11 am * Entry Fee: \$85

Reservation Deposit: \$25 for one \$30 for two Final Payment & ALL info Due By: Mar 10th

Please reserve a spot for me/my child _____.

I am/ S/he is _____ months/years old (as of Mar 17th) DOB _____

I have enclosed \$_____ to reserve my/her/his space (must send at least \$25). I will be sending the remainder of the payment on: _____.

I **will/will not** be selling sponsorship tickets.

If so, my goal is: _____ tickets. I **will/will not** be selling ads.

Parent's Name(s): _____

Address: _____

Phone Number: _____

Email Address: _____