

TEMPE DIABLOS *Casino Capers*

A NIGHT IN THE ORIENT...

Registration Form

Please mail your registration form to your favorite Diablos at:

Tempe Diablos Charities
P.O. Box 13246
Tempe, AZ 85284-0055

First Name: _____

Last Name: _____

Company Name: _____

Address: _____

Primary Phone: _____

Cell Phone: _____

E-mail Address: _____

Number of **ADMISSION TICKETS** (\$80 per ticket) _____

Number of **CHAIRMAN'S SPECIAL DRAWING TICKETS** _____

(\$40.00 per ticket OR 3 tickets for \$100 if you purchase tickets before the event.
Hurry and purchase online, as tickets during the event will be \$50.00 per person.)

Diablos Referral/Favorite Diablos: _____

Check this box to opt-in to the Tempe Diablos newsletter. Be the first to hear about great new events, special limited time promotions, discounts, and more. No spam.

