

TRIVIA NIGHT RSVP FORM

Name:	
Email Address:	
Phone Number:	
Total Number of People: @ \$18 per person = \$ Total	al
Please Choose One:	
I've formed my own team! (Please attach names of team members)
I plan to join a team the night of the event	

Please make checks payable to Temple Sholom in Broomall

Return FORM and PAYMENT to the Temple Office, ATTN: Trivia Night

Questions? Please contact April Else at April.R.Else@gmail.com