



EAST RUTHERFORD CIVIC PRIDE 2018 SPRING FLING TRICKY TRAY



Is Proud to
support

Life
Threatening

Pediatric
Diseases



Gambling License #
120-8-41130

March 28, 2018

50/50 CASH RAFFLE

Doors Open @ 5:30 p.m.
Drawing & Dinner begins at 7:00 p.m.

At **The Graycliff** 122 Moonachie Ave in Moonachie
GPS address is 290 Moonachie Ave.

Admission (Adults ONLY) \$50.00 purchased at door on 3/28/18
\$45.00 includes: Four course meal, One door-prize
raffle entry & One sheet of Tier 1 tickets



CASH BAR
DOOR PRIZES
RESERVE TABLES
OF 10
MONEY TREES
SCRATCH OFF
BOARDS

To **purchase tickets** please go to www.ercpa.us or Print & Complete flyer to include payment.
Mail to: ERCPA P.O. Box 54 East Rutherford, N.J. 07073. If you have any questions or would like to
make a donation, please contact Jane at JaneConti1@gmail.com If urgent you may call 201-390-4745

Date: March 28, 2018
Place: The Graycliff, 122 Moonachie Ave, Moonachie (GPS Users) 290 Moonachie Ave
Doors Open: 5:30pm **Dinner & Drawing starts:** 7:00 p.m.
Admission Price: \$45.00 (includes 4 Course Dinner and 1 sheet of tier 1 tickets)

RESERVE A TABLE OF 10 maximum ONLY. Minimum of 8 paid tickets reserves a partial table, ERCPA will fill the remaining two seats.

Mail before 3/14/18 to: ERCPA, P.O. Box 54, East Rutherford, NJ 07070

- MAKE ALL CHECKS PAYABLE TO ERCPA – TRICKY TRAY - Use separate sheet for additional participants.

REGISTRATION – TRICKY TRAY – MARCH 28, 2018

_____ of Tickets x \$45.00 each = \$ _____ (3% of your total will be added for credit card purchases)

Mandatory Information

Primary Contact: _____
Home Address _____
Home Phone: _____ Cell Phone _____
E-Mail: _____

Name: First _____ Last : _____
Home Address _____
Home Phone: _____ Cell Phone _____
E-Mail: _____

Name: First _____ Last : _____
Home Address _____
Home Phone: _____ Cell Phone _____
E-Mail: _____

Name: First _____ Last : _____
Home Address _____
Home Phone: _____ Cell Phone _____
E-Mail: _____

Name: First _____ Last : _____
Home Address _____
Home Phone: _____ Cell Phone _____
E-Mail: _____

Name: First _____ Last : _____
Home Address _____
Home Phone: _____ Cell Phone _____
E-Mail: _____

Name: First _____ Last : _____
Home Address _____
Home Phone: _____ Cell Phone _____
E-Mail: _____

Name: First _____ Last : _____
Home Address _____
Home Phone: _____ Cell Phone _____
E-Mail: _____

PRINT ADDITIONAL SHEET FOR GROUPS OF 10

Print additional sheet for groups over seven!



3% of total if using credit cards

PAYMENT METHOD Amount \$ _____ Visa MasterCard American Express Check # _____ Cash Amount _____
Credit Card Number ____/____/____/____/____ - ____/____/____/____ - ____/____/____/____
Credit Card # Expiration Date ____/____/____/____ 3 Digit Security Code _____ (located on back of card)

Signature

Printed Name as on card