

**DOWN SYNDROME ASSOCIATION OF LOS ANGELES
2014 ANNUAL HOLIDAY DANCE
RESERVATION FORM**

**PLEASE RETURN BY MONDAY, DECEMBER 1, 2014
RESERVATIONS MUST BE PAID IN ADVANCE, NOT AT THE DOOR**

Yes, I plan to attend the Annual Holiday Dance for young adults.

My Name: _____

Address: _____

_____ Telephone: (____) _____

Emergency contact name and number where someone can be reached while I am at the dance: _____

The following friend(s) **18 or older** will also attend the dance:

Name:	Phone:
_____	_____
_____	_____
_____	_____
_____	_____

The DSALA will provide a light meal. Please provide snacks/meal for individuals with special dietary needs.

Cost: \$20.00 per person

Enclosed is my check for \$ _____

Make check payable to DSALA and mail to:

Down Syndrome Association of L.A.
16461 Sherman Way, Suite 180
Van Nuys, Ca 91406
Tel. 818-786-0001

You can also register online at www.dsala.org

For further information contact Sandra Baker at sandra@dsala.org or 818-786-0001

Attention: Adults in need of behavioral support, please provide an assistant (No additional cost for the assistant to attend the event)- Thank you