

FIRST FAMILIES OF FIRST NIGHT SPONSORSHIP

\$250

THANK YOU FOR SUPPORTING FIRST NIGHT ST. PETERSBURG! PLEASE:

1. Fill out the form
2. If paying by check, make it payable to First Night St. Petersburg, Inc.
3. Mail form to
First Night St. Petersburg
PO Box 1915
St. Petersburg, FL 33731

Name: _____

Address: _____

City, ST, Zip : _____

Phone: _____

Email: _____

T-Shirt sizes/Number (4 total)

XL _____ L _____ M _____ S _____

Child L _____ Child M _____ Child S _____

Paying by check: ___

Paying by: Visa _____ MasterCard _____

Number: _____

Expiration Date: ____/____

Signature: _____

You will receive your buttons, shirts and information about parking and seating the first week of December.

A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALL TOLL-FREE (800-435-7352) WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY STATE. FIRST NIGHT ST. PETERSBURG REGISTRATION NUMBER: CH15937