



RESERVATION FORM *for*

Ck.# _____]
Date: _____]

SYMPHONY EAST'S

Annual Sounds of Joy!

HOLIDAY GALA LUNCHEON & FUNDRAISER

In the ballroom at the Lamplighter Restaurant, 6566 William Penn Hwy, Delmont, PA 15626 (724) 461-1031

Monday, December 4, 2023 - 11:00 A.M.

Deadline is *Thursday, November 30, 2023*



I/We will Attend _____
First Name Last Name

My guest(s) will be: _____

The meal offerings will be at a Substantial Buffet and with Assorted Desserts.

[Note that assistance will be given to anyone needing help to carry food dishes to the table.]

Number of attendees @ \$35.00 per meal: _____ **Total payment:** _____

Although I cannot attend, please accept this contribution to benefit the PSO: _____

**Please send this reservation form and check payable to *Symphony East* by *Thursday, November 30*, to:
Dolores Gallagher, 140 LaVale Drive, Apt. 404, Monroeville, PA 15146**