

MEMBERS NAME: _____ LOCATION: _____

PHONE: _____ MEMBER OR NON MEMBER --- (circle)

DATE OF PARTY: _____ SESSION TIME: _____ LOCATION: _____

PLEASE LIST NAMES OF GUESTS ATTENDING THE PARTY: (ADULTS & CHILDREN)

Name	LSC Member Yes/No	Name	LSC Member Yes/No
1.		31	
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