



Transform Your Health with Inner Peace

Sunday, October 19, 2008 - 1pm - 6pm

Registration Form

Name: _____

Address: _____

City: _____ State: _____ Zip code: _____

E-mail: _____

Phone: _____

Spiritist Center (optional): _____

Choose one of the following options:

() 1 ticket \$30.00 () 4 tickets \$120.00

() 2 tickets \$60.00 () 5 tickets \$150.00

() 3 tickets \$90.00 () 6 tickets \$180.00

Payment methods:

1. **By check:** Make it payable to **Spiritist Society of Baltimore**

2. **By Credit Card:** Fill out the information below (**use your billing address above**).

Card Type:



() Visa () MasterCard () Discover () American Express

Card Number: _____ - _____ - _____ - _____

Expiration Date: _____

Card Security Code:



Please PRINT and SEND this form with your payment to the following address:

The Spiritist Society of Baltimore
115 S. High St.
Baltimore, MD 21202

For more information, please check the website at: www.ssbaltimore.org or call 410-382-5328