2021 MRS. AMERICA

TICKET REQUEST FORM

Please Print and email this	form to MRS. AM	IERICA INC.	e-mail: <u>info@mrs</u>	america.com
Purchaser's Name:				
Address:				
City:		State:	Zip:	
Phone:	e-mail:		Mobile #:	
I am affiliated with Mrs. (S	State Delegate):			
PRELIMINARY COMPETI Dress Code: Casual Attire			Open: 1:30 pm / S	howtime:2:00pm
FINAL COMPETITION - Dress Code: Formal – Black		mber 20, 2021 Door	rs Open: 7:00 pm	/ Showtime: 7:30pm
TICKETS:: PRELIMINARY COMPET CHECK BOX IF DELEGATE'S				
FINAL COMPETITION:				\$
CHECK BOX IF DELEGATE'S	HUSBAND <u>WILL</u> ATT	TEND FINALS	• • • • • • • • • • • • • • • • • • • •	[
(non-transferabl under 3 y/o in str	e Husband's ticket e if he does not atte	s in totals. Husband end). Children may : sed entry by the Secur	s of the delegates a	re complementary
TOTAL TICKETS: (P)	(F)	TOTAL	AMOUNT: \$	
Please forward Check or M	oney Order Payab	<u>le to:</u> Mrs. America,	Inc. P. O. Box 50'	70 – LaQuinta, CA 92248
Credit Cards: (Circle <u>) VIS</u> 760) 564-9777			to call the Mrs. An	nerica office directly:
Cardholders Name:	(Print)		(Signature)	
Card Number:	(/	Authorization #_	Expira	tion Date:
Cardholders Phone: ()			obile:	