



Open House Registration Form

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone #: _____ Cell Phone #: _____

of People Attending: _____ (cost is \$20 per person)

Payment Information:

Check Enclosed: Credit Card: VISA MasterCard

Make checks payable to: Central Music Boosters

Name as it appears on Credit Card: _____

Card #: _____ Expiration: _____

CVV Code (last 3 digits on back of card): _____

Event Details:

Tours will be available from 1-5 pm with the last tour beginning at 4:30 pm.
Shoes will need to be removed while touring the house.

Members of the Muirhead family will be in attendance to answer questions.
Entertainment will be provided by student musicians from the Central Community
School District. Refreshments available.

This event benefits the Central Music Boosters, a non-profit organization to
enhance, enrich and support Central Community School District 301 Vocal and
Instrumental Music programs.

ALL PROCEEDS GO TO THE CENTRAL MUSIC BOOSTERS.
RECEIPTS FOR YOUR DONATION ARE AVAILABLE UPON REQUEST.