

**TWENTY-FIFTH CONSULAR CORPS GOLF / TENNIS INVITATIONAL**  
**MONDAY, SEPTEMBER 26, 2011**  
**COCKTAIL RECEPTION SPONSOR PARTICIPANT REGISTRATION**

*REGISTER BY TUESDAY, SEPTEMBER 6, 2011*

TO COMPLETE AND SUBMIT THIS FORM ELECTRONICALLY, GO TO <http://ceo.lacounty.gov/pdf/CCorps/cocktail.pdf>

**FAX:** (213) 621-2084  
**E-MAIL:** [ctorres@ceo.lacounty.gov](mailto:ctorres@ceo.lacounty.gov)

**MAIL:** Los Angeles County Office of Protocol  
 500 West Temple Street, Room 375  
 Los Angeles, CA 90012

<div style="background-color: black; color: white; padding: 2px; font-weight: bold; text-align: center;">1</div> <p>Name _____</p> <p>Title _____</p> <p>Company _____</p> <p>Address _____</p> <p>City _____ Zip _____</p> <p>Bus. Phone (____) _____ Fax (____) _____</p> <p>E-mail _____</p> <hr/> <p><i>I will participate in International Bingo</i></p> <p><input type="checkbox"/> Yes      <input type="checkbox"/> No</p> <hr/> <p><i>I will attend the cocktail buffet:</i>    <input type="checkbox"/> Yes      <input type="checkbox"/> No</p> <p>GUEST'S NAME _____</p> <p>AFFILIATION _____</p> <p><input type="checkbox"/> No GUEST</p> <hr/> <p><i>I regret to all Invitational activities:</i>    <input type="checkbox"/></p>	<div style="background-color: black; color: white; padding: 2px; font-weight: bold; text-align: center;">2</div> <p>Name _____</p> <p>Title _____</p> <p>Company _____</p> <p>Address _____</p> <p>City _____ Zip _____</p> <p>Bus. Phone (____) _____ Fax (____) _____</p> <p>E-mail _____</p> <hr/> <p><i>I will participate in International Bingo</i></p> <p><input type="checkbox"/> Yes      <input type="checkbox"/> No</p> <hr/> <p><i>I will attend the cocktail buffet:</i>    <input type="checkbox"/> Yes      <input type="checkbox"/> No</p> <p>GUEST'S NAME _____</p> <p>AFFILIATION _____</p> <p><input type="checkbox"/> No GUEST</p> <hr/> <p><i>I regret to all Invitational activities:</i>    <input type="checkbox"/></p>
<div style="background-color: black; color: white; padding: 2px; font-weight: bold; text-align: center;">3</div> <p>Name _____</p> <p>Title _____</p> <p>Company _____</p> <p>Address _____</p> <p>City _____ Zip _____</p> <p>Bus. Phone (____) _____ Fax (____) _____</p> <p>E-mail _____</p> <hr/> <p><i>I will participate in International Bingo</i></p> <p><input type="checkbox"/> Yes      <input type="checkbox"/> No</p> <hr/> <p><i>I will attend the cocktail buffet:</i>    <input type="checkbox"/> Yes      <input type="checkbox"/> No</p> <p>GUEST'S NAME _____</p> <p>AFFILIATION _____</p> <p><input type="checkbox"/> No GUEST</p> <hr/> <p><i>I regret to all Invitational activities:</i>    <input type="checkbox"/></p>	<div style="background-color: black; color: white; padding: 2px; font-weight: bold; text-align: center;">4</div> <p>Name _____</p> <p>Title _____</p> <p>Company _____</p> <p>Address _____</p> <p>City _____ Zip _____</p> <p>Bus. Phone (____) _____ Fax (____) _____</p> <p>E-mail _____</p> <hr/> <p><i>I will participate in International Bingo</i></p> <p><input type="checkbox"/> Yes      <input type="checkbox"/> No</p> <hr/> <p><i>I will attend the cocktail buffet:</i>    <input type="checkbox"/> Yes      <input type="checkbox"/> No</p> <p>GUEST'S NAME _____</p> <p>AFFILIATION _____</p> <p><input type="checkbox"/> No GUEST</p> <hr/> <p><i>I regret to all Invitational activities:</i>    <input type="checkbox"/></p>