



Item No.

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BUY-IN PARTY FORM - AUCTION 2016

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Auction Chair: DeAnna Swan: deswan9@gmail.com

FAMILY INFORMATION

SJA Family Name:	Phone:
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If applicable, name of family to split for procurement:

BUY-IN PARTY INFORMATION

Name of Buy-In Party:

Date of Party:	Start Time:	End Time:
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Type of Party:	<input type="checkbox"/> Adult	<input type="checkbox"/> Family	<input type="checkbox"/> Kids	Grades:
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Category of Attendees:	<input type="checkbox"/> Individual	<input type="checkbox"/> Couple	<input type="checkbox"/> Family
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Number Allowed:	Price \$	Procurement Amount:
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Party Host(s):

Address:	City:	ST:	Zip:
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Phone:	Alt. Phone or Fax:
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Email Address:

Description of Buy-In Party

TO BE COMPLETED BY AUCTION COMMITTEE

Item Title

Item Number
(also enter at top right)

Entered

Packaged

Thank you for supporting SJA Catholic School!