Nowruz 2011 Ticket Order Form

All required information is required for processing your Nowruz ticket request.

Please complete entire form and return FIOC	along with your check to:
P.O.Box 901	
Farmington, CT 06034-901	
Name:	_ Phone* :
Address:	
City/State:	Zip:
E-Mail*:	<u> </u>
Seating Preferences:	
* Please do not forget to include you	ur E-mail & phone number.
Members:	
Number of Adults X (\$70) =	
Number of children $X ($55) =$	
Total =	
Non-Members:	
Number of Adults X (\$80) =	
Number of children X (\$65) =	
Total =	
\$ check enclosed (ma	ake payable to FIOC Inc)
FIOC = Foundation of Iranian of Conn	ecticut