

**Working Families' Friend**  
**Casino Night**  
**Friday, February 2, 2024 6:00 - 10:00 PM**

**Name of Organization:** \_\_\_\_\_

**Contact Name & E-mail:** \_\_\_\_\_

**PLAYER NAMES**

**1)** \_\_\_\_\_

**2)** \_\_\_\_\_

**3)** \_\_\_\_\_

**4)** \_\_\_\_\_

**5)** \_\_\_\_\_

**6)** \_\_\_\_\_

**7)** \_\_\_\_\_

**8)** \_\_\_\_\_

**9)** \_\_\_\_\_

**10)** \_\_\_\_\_

**Return this form with check, or email to [nathan@wffriend.org](mailto:nathan@wffriend.org)**