



Susan G. Komen
Los Angeles County Affiliate
P: 310-575-3011
F: 310-477-7042
5901 W. Century Blvd. Suite 800
Los Angeles, CA 90045

TEAM ZONE RESERVATION FORM

Team Zones provide an excellent VIP area for you and your fellow teammates to enjoy the Race day festivities. Team Zones include a tent, table and chairs, and also complimentary continental breakfast for the entire team. Please complete this form and return it to the Komen LA County office via email (ehernandez@komenlacounty.org or mpetrenko@komenlacounty.org), mail or fax to reserve your VIP Team Zone. We can also process orders over the phone.

*****RESERVATION DEADLINE: paperwork and payment must be received before 3/2/18*****

Team Name: _____

Team Contact: _____

Phone: _____

Email: _____

Cell Phone (for Race Day): _____

In case we are unable to reach you, please include an alternate team contact below:

Alternate Contact: _____

Phone: _____

Cell Phone (for Race Day): _____

Select Team Zone Option: If you need a larger space, please call the office at 310-575-3011

Small Team Zone: \$200.00

Small Team Zones are for teams of 10 or fewer and include: one 10x10 canopy, one 8ft. banquet table, one 60" round table, 6 chairs and also complimentary continental breakfast for the entire team.

Large Team Zone: \$350.00

Large Team Zones are for teams of 30 or fewer and include: one 10x20 canopy, two 8ft. banquet tables, three 60" round tables, 20 chairs and also complimentary continental breakfast for the entire team.

Presented by:
Bank of America 

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TEAM ZONE PAYMENT FORM

*****RESERVATION DEADLINE: paperwork and payment must be received before 3/2/18*****

To ensure your Team Zone is secured, please call Eddie Hernandez at 310-575-3011 to confirm your reservation and receipt of payment.

Please complete this form and return it to the Komen LA County office via email (ehernandez@komenlacounty.org or mpetrenko@komenlacounty.org), mail or fax to reserve your VIP Team Zone. We can also process orders over the phone. All contact info is included at the top of this form.

Name: _____

Company (if corporate team): _____

Billing Address/Zip: _____

Phone: _____

Email: _____

Team Zone Size: _____

Small Team Zone: \$200.00

Large Team Zone: \$350.00

Name as it appears on credit card:

Card Type: Mastercard Visa American Express

Credit Card Number: _____

Expiration Date: _____

Security Code: _____

Signature: _____

Date: _____



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