

FOR MASTER OF CEREMONIES/PARA MAESTRO DE CEREMONIA

NAME/NOMBRE \_\_\_\_\_  
CITY \_\_\_\_\_ CONTACT PERSON \_\_\_\_\_  
CIUDAD \_\_\_\_\_ PERSONA DE CONTACTO \_\_\_\_\_

Tell us about your organization and/or business in the space provided below and send this card with your application. Please type/print clearly. *Thank you.*  
Diganos algo acerca de su organization o negocio en este espacio. *Gracias.*

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