

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.*

*Describe algo acerca de su organización o negocio en este espacio. Gracias.*

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