

Wednesday Evening  
January 31st, 2024  
6:30 - 9:30 pm

Buffalo Convention Center

In lieu of tickets, guests will be listed alphabetically at check-in. Please print the names of your guests on the back of this form. If you do not have all guest names at this time, you may provide them at a later date, or guests may check in under your company name.

\_\_\_\_\_ Guests at \$150 per person Advance Purchase through January 15th = \$ \_\_\_\_\_

\_\_\_\_\_ Guests at \$200 per person, after January 15th = \$ \_\_\_\_\_

Kindly make checks payable to NFADA Charitable Foundation or include credit card information:

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Security Code from Back of Card: \_\_\_\_\_

Cardholder Name: \_\_\_\_\_

Billing Zip Code: \_\_\_\_\_

Company Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

E-mail address: \_\_\_\_\_ Phone # \_\_\_\_\_

Presented by New Car Dealers of WNY Charitable Foundation & Independent Health

**The following individuals will attend the  
2024 Buffalo Auto Show Charity Preview Party**



(Please print clearly)

Last name

First name

E-mail address

- |     |       |       |       |
|-----|-------|-------|-------|
| 1)  | _____ | _____ | _____ |
| 2)  | _____ | _____ | _____ |
| 3)  | _____ | _____ | _____ |
| 4)  | _____ | _____ | _____ |
| 5)  | _____ | _____ | _____ |
| 6)  | _____ | _____ | _____ |
| 7)  | _____ | _____ | _____ |
| 8)  | _____ | _____ | _____ |
| 9)  | _____ | _____ | _____ |
| 10) | _____ | _____ | _____ |