

**The Saturday Club Cotillion  
2007-2008**

Name: Master Miss \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Phone Number: \_\_\_\_\_

School: \_\_\_\_\_ Present Grade \_\_\_\_\_

Email: \_\_\_\_\_

**You will receive your confirmation by email**

I would like to chaperone on the following date (s): \_\_\_\_\_

\$150 per member                      \$125 per second family member  
Please make check payable to: The Saturday Club  
Please mail this response card with check to:  
The Saturday Club P.O. Box 521 Wayne, PA 19087