

Join Our Extended Family



Extended Family Member Name:

Mailing Address:

E-mail address:

Phone number:

Birthday (month & day):

If this is a gift:

Purchaser Name:

Purchaser Address:

Purchaser Phone number:

Purchaser E-mail address:

Please include payment for \$50 to Prairie Plate Restaurant with your application.
To pay by credit card, provide your credit card information here or call the
restaurant.

Name on Card:

Card type and number:

Expiration Date:

CCV:

Signature authorizing \$50.00 charge: