



## Helping Hands Fundraising Program Registration Form

Thank you for your interest in our Helping Hands program, the easy way to raise money for your organization. So we can better handle your requests, please fill out the form below.

My school, place of worship or non-profit group is interested in:

Hosting a Helping Hands Night at the Diner.

Dates of Interest: \_\_\_\_\_

Number of Attendees Expected: \_\_\_\_\_

Selling Ice Cream Shoppe Coupon Books.

Number needed:  10-24    25-49    50+    Don't Know

Participating in both programs.

Contact Person: \_\_\_\_\_

Organization: \_\_\_\_\_

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

City, State Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

7619 Germantown Avenue • Philadelphia, PA 19119  
(215) 753-1500 - Phone • (215) 753-3106 - Fax  
[trolleycar23@trolleycardiner.com](mailto:trolleycar23@trolleycardiner.com) • [www.trolleycardiner.com](http://www.trolleycardiner.com)