# LEGO build for Children's Hospital

**Name(s): _____**

**_____**

**Address: _____**

**City: _____ Zip: _____**

**Phone: _____ email: _____**

**Age(s): _____**

**Parent/Guardian signature (if under 18) _____**

**____ Payment enclosed* ($20/person)** **_____ Bill me at the door!**

* Please make checks payable to **Heather Dawson**
**Mail to:** 111 NW 145th St Seattle, WA 98177
Any questions, please call: (206) 789-3504