



Docs That Rock Benefit
Concert
Thursday, May 7th, 2026
Registration Form

Last Name: _____ First Name: _____

CELL# _____

Email _____

\$50.00 Per Ticket Number of Tickets: _____

Attendees: _____

Make Check payable to "New York Section, AUA". Please send payment to:

New York Section, AUA
4100 Duff Place, Lower Level
Seaford, NY 11783
ATTENTION: MICHELE PAOLI

Charge my: _____ Amex _____ Visa _____ MasterCard

Card # _____

Signature _____

Exp. Date _____

Thank you,

Michele Paoli
Executive Director, New York Section, AUA