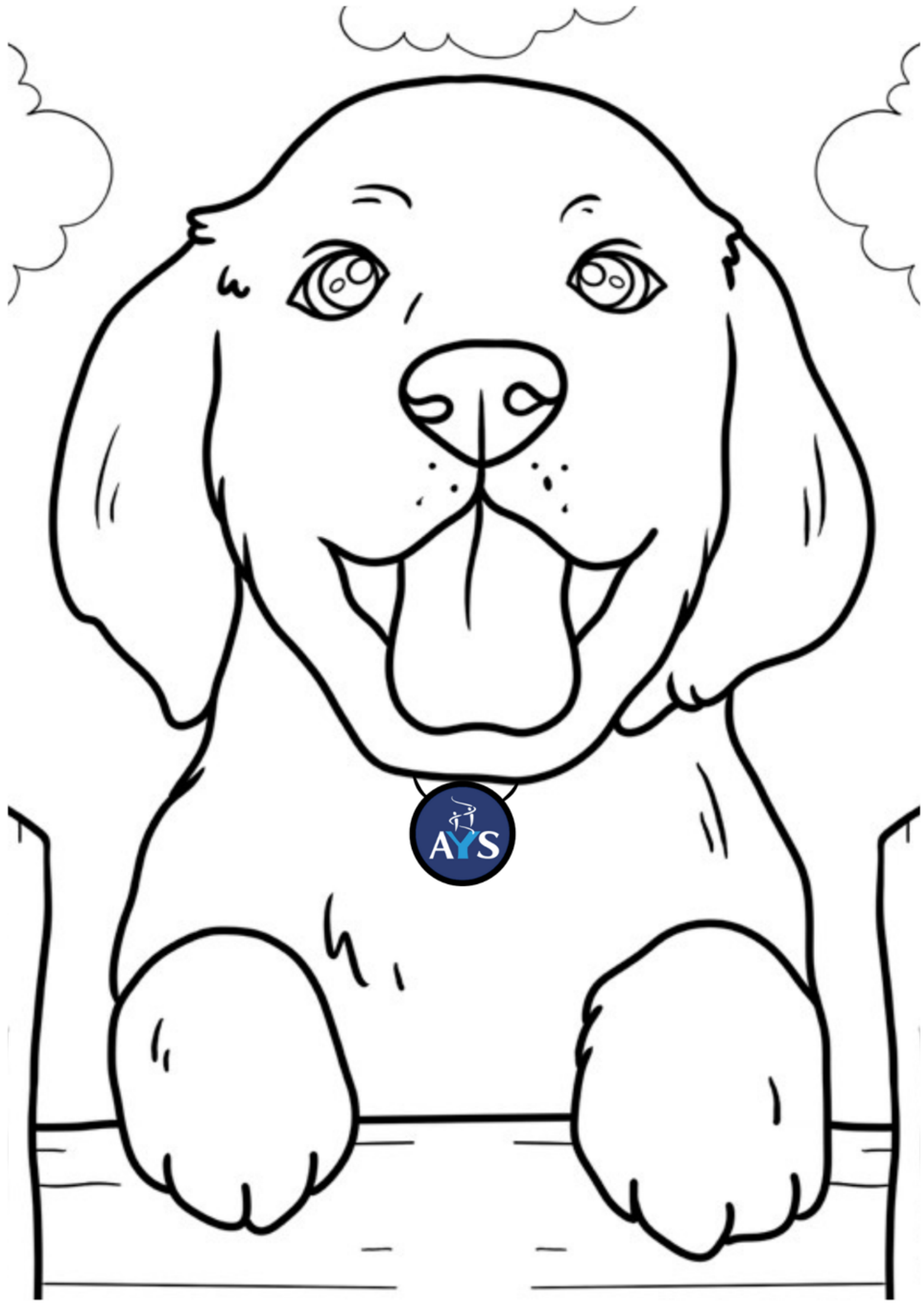




First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Contact Number: \_\_\_\_\_

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

*Please submit via an AYS staff member, or at reception at any of  
our offices for your chance to win!*