

PERFORMERS: PLEASE ENSURE YOU COMPLETE THIS FORM:

NAME: _____

TELEPHONE: _____

CELLULAR: _____

EMAIL: _____

I REQUIRE ONE (1) PARTNER PASS @ \$70.00 yes _____ no _____

MEALS:

You **MUST** indicate which meals you will or will not require so the proper tickets can be included in your registration package and we have accurate numbers for our caterer.

These numbers must be received by August 16, 2019.

PLEASE BE AWARE: If you reserve a meal ticket, we are obligated to pay for it whether you use it or not.

FRIDAY, September 20, 2019:

Lunch yes _____ no _____ Partner _____

Cold Plate Supper yes _____ no _____ Partner _____ *served at the Elks Hall*

This supper is not included in the Partner Pass so \$10.00 will be charged at the door.

Please indicate if your partner will attend with you.

SATURDAY, September 21, 2019:

Lunch yes _____ no _____ Partner _____

Beef Buffet yes _____ no _____ Partner _____ *served at the Legion Hall*

SUNDAY, September 22, 2019:

Pancake Breakfast yes _____ no _____ Partner _____ *served at the Elks Hall*

Lunch yes _____ no _____ Partner _____

BILLET:

I require a billet for the nights of:

Friday, September 20, 2019 yes _____ no _____ Partner _____

Saturday, September 21, 2019 yes _____ no _____ Partner _____

Smoking _____ Non-Smoking _____

I (we) have the following allergies / special needs / special requests: