

Tuesday, August 27, 2024 – 11:30AM – 1:00PM CHI Health Center (455 N. 10th St.)



This is not a ticketed event. It is reservation only. No refunds. Applicable sales tax is included in non-tax-deductible portion of payment.

Deadline is Friday, August 9, 2024 for Reservations, Guest Names & Meals

IVESE	ve four Seats	Contact Perso		Nesei valiui		
	ables seat 10.	First 9 Last Name				
Regular Lev	/el:	First & Last Name:				
# of Seats:	of Seats: Email:					
_	Phone: □ W □ C.					
	S165 tax deductible)	This reservation is: Personal	☐ Business	(include Bus	iness Name below)	
		Business Name:				
Payment Information						
☐ Credit Card	d: UISA Master		Check:	Enclosed	☐ Will Follow	
Card #:						
Security Code: Exp. Date:						
Name on Card:						
Card Billing Address:						
City: ST: Zip:						
Total to be Charged: \$						
First & Last Name of Guests Meal Selection						
Guest List & Meal Selection Deadline: Friday, August 9, 2024. After 8/9, any substitute guests will check-in under the original name, but meals cannot change.			Regular, Vegetarian, Vegan, or Gluten Free			
1	ny substitute guode will oncok in	andor the original name, but mode carmete	mango.	vogar	, or Claterri 100	
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