

SCI Northern Ohio Chapter

BANQUET REGISTRATION FORM

THIS IS A SELLOUT EVENT!

Reserved seating ONLY with paid registrations RECEIVED by Feb 18th!

Name _____ Phone _____

Address _____

Email _____

Guests (Please list guest names below)	\$70.00 each	
Table of 8** (please list guests names below)	\$560.00 each	
	TOTAL ENCLOSED \$	

** Full tables are seated in order of reservation date from the second row back***

List of Guest Names

Credit Card _____

Exp Date ____ / ____ CVC# _____ Billing Zip Code _____

Name on Card _____

Signature _____

Make checks payable to:

Northern Ohio SCI

Mail: Northern Ohio SCI

c/o Scott Powell

12377 Hollow Ridge Rd

Doylestown, OH 44230

Questions: (330) 416-9710

Pay online at:

www.nohiosafariclub.org