



RESERVATION FORM – Lunch/Dinner at the Nationals 2009

Stowe Stadium

Monday through Friday, August 10 -14 *from* 11:30 AM – 1:00 PM

Name of the Organization or Group: _____

____ Yes, we will participate in “**Lunch at the Nationals**”

____ No, we will not participate this year

We will attend on the following date(s)

____ Monday , August 10	____ Number attending
____ Tuesday , August 11	____ Number attending
____ Wednesday , August 12	____ Number attending
____ Thursday , August 13	____ Number attending
____ Friday , August 14	____ Number attending

***New Event* “Dinner at the Nats”**

Monday, August 10 (Evening - 6:00 & 6:30 PM)

____ 6:00 PM	____ Number attending
____ 6:30 PM	____ Number attending

***For each person attending, please fill out a separate form to indicate dinner choices**

Select 1 Main Dish:

____ Turkey & Gouda Panini	____ Grilled Vegetable Wrap
____ Grilled Chicken & Cheddar Panini with Roasted Red Peppers	

Select 2 Sides:

____ Pesto Pasta Salad	____ Small Side Salad	____ Coleslaw	____ Cheese Cups
____ Fruit	____ Chips	____ Yogurt	____ Soda
____ Water	____ Tea		

We will prepay \$10.00 per person (for either lunch or dinner) by:

____ Enclosed check made out to “USTA Lunch at the Nationals”

____ Credit Card (No Debit Cards)  

Name: _____

Credit Card #: _____

Expiration Date: _____ 3 digit security Code # _____

Contact person responsible for making reservations and paying for the group:

Name: _____

Organization: _____

Address: _____

City, State, Zip: _____

Phone: _____ E-mail: _____

Send Reservations by July 29 to: USTA - Lunch at the Nationals
c/o Kathy Howard 3238 Old Colony Road
Kalamazoo, MI 49008

269.599.1814

kdkhoward@yahoo.com