

Reservation Card

Please check title and list full name, current or highest office held and organization

Mr. Mrs. Ms. Other _____

1) _____ Meal choice
Full Name Please Circle
SS FM SF

Current or Highest Office-year Hereditary Organization

Mr. Mrs. Ms. Other _____

2) _____ Meal choice
Full Name Please Circle
SS FM SF

Current or Highest Office-year Hereditary Organization

Mr. Mrs. Ms. Other _____

3) _____ Meal choice
Full Name Please Circle
SS FM SF

Current or Highest Office-year Hereditary Organization

I/We would like to be seated with _____
Priority seating with early confirmed reservations

Contact - Phone _____ E-mail _____

**For Banquet reservation and program listings,
Please make checks payable to MDSSAR and return by November 25, 2016**

of Reservations _____ @ \$75 per person = \$ _____

I/We would like to be a patron-tax deductible. (circle one)
\$250 \$150 \$100 \$50 \$25 Other _____

Name to appear in the program as:

I am unable to attend: my tax-deductible gift is enclosed \$ _____

Your Name _____

Meal choices
SS – Stuffed Shells FM – Filet Mignon SF – Salmon Filet

Return this form with payment by November 25th to
David W. Hoover
1701 Pleasantville Road
Forest Hill, MD 21050

Hotel Reservations due by November 17th.