

PLEASE RESPOND BY MONDAY, SEPTEMBER 10, 2007

Reservations

Reserve _____ ticket(s) at \$100 per guest*

Reserve _____ table(s) of eight at \$750 per table*

Reserve _____ table(s) of ten at \$900 per table*

*Please list names and entrée choices below.

Contact Name

Firm

Address

Phone

Email

Dinner Selections:

[B] - 20 oz. Prime Rib of Beef

[S] - Baked Salmon

[V] - Vegetarian Eggplant Parmigiana

Enclosed is my check for \$_____.

Please make check payable to AGC/CT and mail back in the enclosed envelope. For further information, contact Carol or John at 860.529.6855.

Attendee Names

Entrée choice

[B] - [S] - [V]

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

9. _____

10. _____