

RESERVATION CARD

NAME OF ATTENDEES:

LUNCHEON SELECTION: CHICKEN SALAD

FRENCH

(VEGETARIAN)

WRAP

DIP

QUINOA ASIAN SALAD

PAYMENT INFORMATION

COST: \$25/PERSON (TABLE SEATS 8)

CHECK ENCLOSED FOR \$ _____ (PAYABLE TO MONTANA CDC)

CREDIT CARD (VISA/MASTERCARD/DISCOVER): AMOUNT \$ _____

NAME ON CREDIT CARD: _____

SIGNATURE: _____

BILLING ADDRESS: _____

CARD #: _____ EXP: _____