

Reservation Form

(Each person attending must have a completed reservation form)

Name: _____

Address: _____ City: _____ Zip: _____

Day/Evening Phone: _____ Work/Cell: _____

Group/Organization you want to be seated with: _____

Name of Nominee you are honoring: _____

Please indicate your choice of Entrée:

Rainbow Trout: with hazelnut lemon butter, wild rice, steamed vegetables

Pesto Pasta Primavera

Cilantro Lime Chicken: with rice and steamed vegetables

Donation \$ _____

Cost of Dinner \$ 40.00

Total \$ _____

MAKE CHECKS PAYABLE TO: NIGHTINGALE COMMITTEE
We are sorry we can no longer accept reservations via e-mail