**Seating is unreserved, unless a table of 8 is purchased.**

**SFOG-EBC Luncheon Event**

 **Sunday, April 13, 2025**

Attendees: Please circle an entree for each person.

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  chicken  salmon  mushroom tower

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  chicken  salmon  mushroom tower

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  chicken  salmon  mushroom tower

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  chicken  salmon  mushroom tower

Number of people \_\_\_\_ at $110 each $\_\_\_\_\_\_\_

Additional contribution to the education fund $\_\_\_\_\_\_\_

I would like a table for eight, names and checks are included $\_\_\_\_\_\_\_

Total $\_\_\_\_\_\_\_ Check #\_\_\_\_\_

**PLEASE USE THE REVERSE SIDE IF YOU HAVE A PARTY OF MORE THAN 4 PERSONS**

**Mail this form and your check to:**

**Brad Wade 3350 Hermosa Way Lafayette, CA 94549**