

Canton Hall of Fame Chapter APA Reservation Form

Date: **December 21, 2017**

Place: Courtyard by Marriott
4375 Metro Circle NW, North Canton, OH 44720

Time: 5:30 pm – Registration
6:00 pm - Dinner
7:00 pm - Meeting

Cost: Member-\$25.00 / Non-Member-\$30.00 / Meeting ONLY-\$10.00

Agenda: **Preparing for Year End and Looking Into 2018**

Speaker: **Roundtable (Hosted by Cassandra)**

Reservation Deadline: Thursday, December 14, 2017 by NOON

RSVP: Mail completed form with payment *or* email completed form to sherryd@shields-blice.com

Cancellations: **Cancellations will not be accepted after the reservation deadline. Payment must be made for cancellations after the reservation date or no-shows for dinner or meeting-only reservations.**

Name(s) _____ CPP _____ FPC _____

Email Address _____

Company Name _____

Check your choice of dinner(s). Dinner cost includes meal, coffee or iced tea, and dessert. Other beverages available at your own expense.

_____ **Cheese Ravioli**
_____ **Orange Roughy**
_____ **Chicken Marsala**
_____ **8 oz. NY Strip Steak**

(All meals, except Cheese Ravioli, will include Roasted Rosemary Potatoes & CA Medley)

Method of Payment - Indicate below:

- Check made payable to Canton Hall of Fame Chapter APA mailed to PO Box 26471, Akron, OH 44319
Amount Enclosed: _____
- Credit Card – Invoice will be emailed to email indicated above and is payable upon receipt
Requested Invoice Amount: _____
- Cash or Check accepted day of meeting only if other arrangements are not possible
Amount to be Paid: _____