



REGISTRATION FORM – NOVEMBER 4, 2017

MEMBER NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

E-MAIL: _____

GUEST: _____

PRE-REGISTRATION (\$10) _____

TABLES: (#) _____ x \$25 = _____

Please make checks or money order payable to:

Les Ozimkowski
8 Goldenrod Avenue
Northport, New York 11768