

THE CAT FANCIERS' ASSOCIATION, INC. • 2013 ANNUAL MEETING

Function Reservation/Payment Form • Vancouver, WA – June 26-29, 2013

Please use this form, or order online, to make your reservations and payment. Refer to the Schedule of Events for further information regarding these events. Your cancelled check will be your receipt. Tickets for Saturday's dinner may be picked up at Delegate Registration. All other paid functions will have a check-in list.

Name: _____

Phone #: _____ Email: _____

Address: _____

City: _____ State/Country: _____ Zip/Postal Code: _____

EVENTS

Attending Cost per Person Total Cost

Thursday, June 27

1. Winn Feline Foundation Symposium – Cash Bar and light refreshments (*reservation deadline June 14*)
 \$30.00 \$ _____

Friday, June 28

2. Luncheon Buffet (*reservation deadline June 14*) \$10.00 \$ _____

Saturday, June 29

3. American Shorthair Breakfast* (*reservation deadline June 14*) \$26.00 \$ _____

4. Siamese Breakfast* (*reservation deadline June 14*) \$26.00 \$ _____

5. Awards Banquet/Dinner* (*reservation deadline June 14*)

Indicate meal choice by placing letter (A or B or C) next to name in Benching Request Area

A - London Broil \$60.00 \$ _____

B - Columbia River Steelhead \$60.00 \$ _____

C - Vegetarian Dish \$60.00 \$ _____

***ATTENDEE INFORMATION: If payment is being made for anyone other than the person listed above, indicate the function # and the name(s) of additional attendees. Please list attendees for Awards Banquet in the Benching Request section below.**

Name(s) of Additional Attendees

Function #: _____

PAYMENT INFORMATION – All checks payable to CFA (including payments for Winn Symposium)

Enclosed is my check/money order. Please charge my MasterCard/Visa/Discover/AMEX (complete charge card information).

_____ Charge Card Number

_____ Expiration Date

_____ Security Code

_____ Signature

Send completed form and payment to:

The Cat Fanciers' Association, Attn: Reservations, 260 East Main Street • Alliance OH 44601

Don't forget to complete the section below if ordering Awards Banquet tickets.

AWARDS BANQUET BENCHING REQUEST. Names of individuals to be seated together.

Be sure to include menu selection (A or B or C) • Payments for all individuals listed below must be included with this form.

| | | |
|--|--|--|
| | | |
| | | |
| | | |

Total number of people in party: _____