

# *Please make my reservation for the Annual Meeting*

Individual tickets \$35 each. Table of ten \$350.

\_\_\_\_\_ # of ticket(s) \_\_\_\_\_ table(s) of ten.

I would like to be a sponsor \$ \_\_\_\_\_

I am unable to attend but enclosed is a donation of \$ \_\_\_\_\_

## **Tickets mailed to:**

Company \_\_\_\_\_

Contact Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone # \_\_\_\_\_ Email \_\_\_\_\_

Please bill my Visa, MasterCard, AMEX credit card. (circle one)

Card number \_\_\_\_\_ Exp. Date \_\_\_\_\_

Signature \_\_\_\_\_

**Please RSVP with Payment by August 18, 2008**

Please make checks payable to Pensacola Bay Area Chamber of Commerce.

Please return payment to Annual Meeting, P.O. Box 550 Pensacola, FL 32561-0550.

**Fax: 850.438.6369**