

39th Annual • ARMED FORCES DINNER • Monday, May 14th 2018

Name(s)/Rank/Affiliation: _____

Guest's Name(s): _____

Address: _____
State Zip

Phone: _____

E-mail: _____

- Please remit \$100 per person or \$50 for active duty, O3 and below, payable to MASC.

RESERVATIONS ARE VERY LIMITED. Checks will be returned when full.
Send response card with payment by Saturday, April 1st, 2018 to
Candee Arndt • 2370 Woodmoor Drive • Brookfield, WI 53045

SEATING PREFERENCE: *I wish to be seated with. . .*

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

For further information contact:

Candee Arndt • 414-732-7201 • carndt2370@aol.com