



DINNER MEETING RESERVATION FORM
(PRINT THIS FORM, COMPLETE AND MAIL WITH PAYMENT)

Date of Dinner Meeting: _____

Name _____

Phone Number _____

Email: _____

Member _____ \$30.00

Non-member _____ \$35.00

Special Needs: If you have special needs as addressed by the Americans with Disabilities Act or require a special entree due to dietary restrictions, please notify SJPA 72 hours prior to the meeting, not the restaurant.

Please return completed form **with** a check, made payable to SJPA, to:

Betsy Lindenberg
55 Chestnut Street
Haddonfield, NJ 08033

Questions? Call at work: 856-354-7700

RSVP no later than TEN DAYS prior to the event.

Registrants are responsible for payment of reservations even if unable to attend. Contact Dinner Chair, Betsy Lindenberg, at publicrelations@sjpaparalegals.org or 856-354-7700 with any questions.

DON'T FORGET TO BRING YOUR DONATIONS FOR OUR LEGALMEN PROGRAM