



**AzFRW 2016 FALL
MEETING REGISTRATION
FRIDAY & SATURDAY,
SEPTEMBER 23-24, 2016**



**DOUBLETREE BY
HILTON - REID PARK
445 S ALVERNON WAY
TUCSON, AZ 85711**

**PLEASE NOTE
REGISTRATION DATES
& FEES.**

**AzFRW Hotel Block—Call direct (520) 881-4200
Rate: \$89 plus taxes. **24 HOUR CANCELTION AP-
PLIES** Block Expires: **September 1, 2016****

**GASLIGHT THEATRE
on Friday evening is SOLD OUT
To be placed on a waiting list contact
Mary Baumbach at 602-206-1189
maryb85044@yahoo.com**

Please mail Registration with remittance to:
Kathy Dolge, Arrangements Chair
3607 Camino Bella Rosa, Sierra Vista, AZ 85650
Questions or special needs? Contact Kathy at
602-510-8986 or Arrangements@azfrw.com

<input checked="" type="checkbox"/>	MEETING REGISTRATION FEES:		
	Early Bird! <i>Register by August 25</i>	\$25	
	Postmarked Between <i>Aug. 26 – Sept 8</i>	\$35	
	Postmarked <i>September 9 or later</i>	\$50	
	FRIDAY LUNCHEON ENTRÉES:		
	BEEF STROGANOFF Over Buttered Noodles and Vegetable	\$30	
	PASTA PRIMAVERA With Steamed Vegetables and Basil Marinara	\$30	
	CHICKEN FRICO Basil Marinara and Melted Mozzarella	\$30	
	SATURDAY LUNCHEON ENTRÉES:		
	CHEESE ENCHILADAS Served with Rice and Beans	\$30	
	COUNTRY MEATLOAF Served w/ Whipped Potatoes and Vegetable	\$30	
	SOUTHWEST CHICKEN With Pineapple Barbeque Sauce Whipped Potatoes and Vegetable	\$30	
	VENDOR TABLES:		
	Club Name (Club Realizes all Profits)	\$10	
	Club Member (Member Realizes all Profits)	\$25	
	Non-Member Vendor or <u>Any</u> Candidate	\$50	
Total:			\$
<i>Please make checks payable to: AzFRW</i>			

Name:	Phone:
Email:	Club:
<input checked="" type="checkbox"/> Please check and complete all applicable items below:	
<input type="checkbox"/>	Check if this your first time to attend an AzFRW State Meeting
<input type="checkbox"/>	Check if you hold elected office (Federal, State, Co, Local) Office: _____
<input type="checkbox"/>	Check if you are a Club officer and please indicate your title: _____
<input type="checkbox"/>	Check if you are a candidate, please indicate office you are seeking: _____
<input type="checkbox"/>	Guest name (if any): _____
(Submit a separate form for each guest but may remit with one check)	

☐ To pay by credit card, please check box and **call AzFRW Treasurer Susan Marcell 602.370.3435** with CC information for processing. **Mail or email Registration to Arrangements Chair Kathy Dolge** so she has your information and menu choices. **Credit/debit payments will be plus 4%.**
A reservation made is a reservation paid. AzFRW members must remit the registration fee to attend.