**Association 2019 Response Form**

*Please return this form to the Association by* **September 11** *along with the check for your 2019 dues.*

*(CS Association of the Pupils of Harvey Wood, 4357 Thorn Crest, Traverse City, MI 49685)*

**Dues: $30.00 Lunch: $28.00/$26.00 or $18.00 (See options below)**

Make your check payable to The Christian Science Association of the Pupils of Harvey W. Wood C.S.B. If you are having lunch with the group, you can pay for both in **one check**.

N**ame (please):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Attending**

\_\_\_\_ I will attend the 2019 meeting

\_\_\_\_ I will not be able to attend this year

\_\_\_\_ I will attend the Friday night gathering

\_\_\_\_ I am unable to travel to Chicago and would like to live stream the meeting. (FYI: This is tricky without an email.)

**Lunch**

\_\_\_\_ I will not be having lunch with the group

\_\_\_\_ I will participate in the group luncheon at the hotel. Please choose one of the following:

\_\_\_\_$28.00 **Sheraton Cobb** and soup ($26 without Chicken) [Rosemary infused chicken breast, ripe avocado, roma tomato, smoked bacon, chopped egg, Monterey jack cheese served on a bed of seasonal mixed greens with tangerine balsamic vinaigrette](http://ohareairport.sheratonemenus.com/eCommerce/shopexd.asp?id=334632&cn=2667&cn2=2681)

\_\_\_\_$28.00 **Cherry Walnut Salad** and soup ($26 without Chicken) [Seasonal mixed greens, dried cherries, blue cheese, diced chicken breast, candied walnuts, julienne cucumber, tossed with cherry vinaigrette](http://ohareairport.sheratonemenus.com/eCommerce/shopexd.asp?id=334633&cn=2667&cn2=2681)

\_\_\_\_$18.00 **Boxed lunch**: roast beef, cheddar cheese, lettuce, tomato, horseradish cream sauce, french banquette

\_\_\_\_$18.00 **Boxed lunch**: Free Range herbed chicken breast, sun-dried tomato pesto, lettuce, tomato, kaiser roll

*\*Meals include a choice of drink, and brownie or cheesecake for dessert*

*When you sign-in Fri. or Sat. at Association, you will be given a meal ticket with your meal choice.*

**Hearing Device**

**\_\_\_\_** Check here if you need a hearing device

**ASSOCIATION MEMBER CURRENT INFORMATION**

\_\_\_\_ Last year’s information is current. There are no changes in my contact info.

\_\_\_\_ I prefer to receive mailings from the Association via email with no postal letters. (Do not check if you already receive mailings via email.)

**If new:**

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State: \_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_

Phone (include area code): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If new: E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(If your email changes during the year, please try to remember to let us know asap - thanks.)**