

RESERVATION FORM



Seating is reserved 8 to 10 per table and assigned in the order received. To ensure seating with your friends, please list the names of your party on the back of this reservation form. Be sure to include an e-mail address for one in your party to receive e-mail confirmation.

Name: _____

Telephone: _____

E-mail: _____

Special dietary restrictions: _____

Please reserve _____ places for members x \$60 each

and _____ places for guests x \$65 each

Cheque enclosed: \$ _____

CHEQUES PAYABLE TO: The Women's Canadian Club of Toronto.

Mail To: Eve Jones
6 Atlas Peak Drive,
Markham, On. L6C 3H6
Tel: 905-927-9187

***We are unable to issue refunds.
Please retain a copy of this form for your records.***