

DINNER WITH ALBANY 2014 TABLE RESERVATION FORM

Please Note: Every effort will be made to accommodate your preferred location. Table reservations are entered in the order they are received. You will be contacted with your exact table location prior to the event.

Please Print Neatly:

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Contact Phone #: _____

Table Reservations: \$40 each

Each table is 6' long and comes with 6 chairs.

- 1: \$40 2: \$80 3: \$120 4: \$160 5: \$200 6: \$240
- 7: \$280 8: \$320 9: \$360 10: \$400 Other: _____

Table Location Preference: (See Table Availability Map): Please indicate your top 3 choices (1-3).

- ____: A South ____: A North
- ____: B South ____: B North
- ____: C South ____: C North
- ____: D South ____: D North
- ____: E South ____: E North
- ____: F South ____: F North

- ____: G South ____: G North
- ____: H South ____: H North
- ____: I South ____: I North

Space Reservations: \$15 (Limited number available)

Parking spaces are located in Sections E, F, and G on the Table Availability Map. You bring your own table and chairs.

- 1: \$15 2: \$30 3: \$45 4: \$60 5: \$75 Other: _____

Parking Space Location Preference: (See Table Availability Map): Please indicate your top 3 choices (1-3).

- ____: E South ____: E North
- ____: F South ____: F North
- ____: G South ____: G North

Payment: You MUST submit payment with this form.

Total Amount Due: \$ _____

Payment Method: If paying by check make it payable to: City of Albany

- Cash (In-person ONLY) Check (In-person ONLY) Visa (In-person, Fax, Online) Master Card (In-person, Fax, Online)

Credit Card #: _____ Expiration Date: _____