

Capitol Regents and Regents



*You are Cordially Invited to
A most memorable evening
Fine Entertainment and Dinning
BICE Ristorante*

*Portofino Bay, Orlando, Florida
5601 Universal Blvd.*

*Thursday, September 10, 2009
6:30 PM – 10:00 PM*

Cost: \$145 includes Dinner and Transportation

*Please Complete the attached Registration Form
and return it to Anna Lee: Firm deadline*

September 1, 2009

alee@nfww.org or 703-548- 9688

See: www.biceorlando.com

*Please Note That All Attendees MUST Depart from Lobby of the Caribe Royale Resort and
Convention Center at 6:30 pm*

NFRW CAPITOL REGENTS and REGENTS

****Return this form NO LATER than September 1, 2009****

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REGISTRANT INFORMATION (please print)

Registrant's Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____ **Cell:** _____

Email: _____

Hotel Information (Please Print)

I will be staying at the Caribe Royale, Orlando, Florida

I will be staying at _____ instead

(Please note that you must meet the bus at the Caribe Royale, Orlando, Florida)

Arrival Date: _____ **Time of Arrival:** _____

Departure Date: _____ **Time of Departure:** _____

Payment Information (Please Print)

Payment by credit card:

(Visa, Mastercard, American Express, or Discover are accepted)

Signature: _____

Card Number: _____ **Exp Date:** _____

Name on Card: _____

I authorize the NFRW to charge my credit card for \$ _____

Billing address if different from above:

City: _____ **State:** _____ **Zip:** _____

Payment by Check(Please make checks payable to the NFRW)

Total Amount: \$ _____

The Internal Revenue Service Requires the following information:

Employer: _____

Occupation: _____

Registration Fee:

\$145 cost of Dinner and
Transportation.

Bus will be provided to the
Bice Ristorante and to the
Caribe Royale.

Cancellation Policy:

**There will be no
Cancellations or Refunds**

Contributions to the NFRW are not deductible as charitable contributions for federal income tax purposes. Corporate, personal, and PAC Checks are accepted.