



**Pacific Shores Region 12  
Sweet Adelines International  
Regional Convention  
May 2 - 4, 2019  
Meals - Saturday May 4, 2019**

<b>Official Use Only</b>
Meal: _____
Room: _____
Time: _____

Chorus Name: \_\_\_\_\_

(Insert Chorus Name)

Would you like a podium and microphone? **\$30 charge for mic**    **Please check**    **Yes**  **No**   
 Would you like a podium only?    **No charge**    **Please check**    **Yes**  **No**

*Choices appear below, with the price per person including Nevada state tax and gratuities. Select the type of function and indicate number of people expected. Total and complete page 2.*

<b>Breakfast Buffet</b>	
<b>Cost Per Person \$17.00</b>	
<b>Description</b>	
Chilled Assorted Fruit Juices Freshly Brewed Regular and Decaffeinated Coffee Assorted Herbal & Regular Tea Sliced Fresh Fruit Assorted Breakfast Pastries, Muffins and Coffee Cakes Scrambled Eggs, Breakfast Potatoes	
<b>Circle two: Bacon, Ham or Sausage</b>	
<b>Cost \$17.00 Per Person</b>	<b>Number of people expected</b> _____
	<b>Total Amount for Breakfast</b> \$ _____
<b>Dinner Buffet</b>	
<b>Cost Per Person \$32.00</b>	
<b>All Buffets are Served With:</b>	
Fresh Seasonal Vegetables Fresh Baked Rolls and Butter Assorted Desserts: Cakes, Pies, Cream Pies, and Pastries Fresh Brewed Coffee, Decaffeinated Coffee Regular Teas and Iced Tea (Herbal on request)	
<b>Cold Selections Description</b>	
Fresh Field Green Salad Bar with Toppings & Dressings Caesar Salad Fiesta Corn Salad	
<b>Hot Entree - Selections Descriptions</b>	
Tri-tip with Boubon Sauce Seared Salmon with Artichoke, Olive and Tomato Breast of Chicken with Sage Demi-Glaze Baked Vegetarian Lasagna.	
<b>Accompaniments</b>	
Baked Potato with Sour Cream & Chives Wild Rice	
<b>Cost \$32.00 Per Person</b>	<b>Number of People Expected:</b> _____
	<b>Total Amount for Dinner</b> \$ _____
<b>If you bring your own wine, please pay Corkage Fee of \$10.00 per bottle to Banquet Captain.</b>	
(Not a chorus charge. Do not include with chorus payment.)	



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CHORUS NAME \_\_\_\_\_  
 Grand total for Breakfast (payment information below) \$ \_\_\_\_\_  
 Grand total for Dinner (payment information below) \$ \_\_\_\_\_  
 Microphone Charge - \$30 , Please write separate check - payment below  
 Number of people that will be seated, but will not be eating from the menu? \_\_\_\_\_

**Primary Contact Person**

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 E-mail Address: \_\_\_\_\_  
 Home Phone: (    ) \_\_\_\_\_  
 Work Phone: (    ) \_\_\_\_\_

**Alternate Contact Person**

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 E-mail Address: \_\_\_\_\_  
 Home Phone: (    ) \_\_\_\_\_  
 Work Phone: (    ) \_\_\_\_\_

**1. INCLUDE MEAL FORMS ALONG WITH YOUR PAYMENT**

**Please make check payable to Nugget**

\$ \_\_\_\_\_ enclosed

**2. Y / N - Requested Microphone during meal**

**Please make separate check payable to Nugget - \$ 30.00**

**MUST BE RECEIVED BY MONDAY, 04/22/19**

**PLEASE SUBMIT REQUESTS TO:**

**Judi Nail**

**3321 Del Mar Avenue**

**Loomis, CA 95650**

**Phone: (home) 916 652-6700 (cell) 916-761-2998**

**e-mail: [j.spike6700@sbcglobal.net](mailto:j.spike6700@sbcglobal.net)**