



2018 EPIC AWARDS LUNCHEON



_____ Yes, I will attend the luncheon on May 9, 2018

Attending @ \$75.00 per person (list additional attendees below)
\$85.00 per person AFTER 4/13/18

First Name _____ Last Name _____

Email Address _____

Phone _____

_____ Reserve Table of 8 @ \$575.00
\$650.00 AFTER 4/13/18
(List 7 additional attendees below)

_____ I am unable to attend
Please accept my contribution of \$ _____

Total amount submitted: \$ _____

Payment by check made payable to **MHASEFL**, or by Charge:

Name on Account: _____

Account #: _____

Exp. Date: _____ Security Code: _____ Billing Zip Code: _____
(3 digits on back of card or 4 digits on front for Amex)

Phone : _____ Email: _____

Signature: _____

MAIL TO: 7145 W Oakland Park Blvd; Lauderhill, FL 33313

or you may Reserve On-Line:: [CLICK TO RESERVE ONLINE](#)

RSVP by May 3, 2018

QUESTIONS? Call: 954-746-2055

Additional Attendees: (Provide First Name, Last Name, Email Address, Phone Number)

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____