

MTA/NJ Christmas Party Reservation Form

December 12, 2019 - 6:30 PM- 10:30 PM

Company Name: _____

Name(s): _____

Phone: _____ Email: _____

Attending @ \$75/person: _____ Amount Enclosed: \$ _____

MENU SELECTIONS

(Please include entrée choice for each person attending.)

____ Filet of Sole Stuffed with Lobster & Lump Crab, citrus butter sauce and fresh lemon

____ Chicken Florentine with spinach and Boursin cheese, charred tomato velouté sauce

____ Sliced Roasted NY Strip Steak, wild mushroom sauce

Payment (Select One): ☐ Credit Card ☐ Check Enclosed (Make payable to the MTA/NJ)

Business: _____

Contact: _____ Email: _____

To pay via **credit card** please fill out the following information:

Name As It Appears On Card: _____

Card Number: _____ Exp. Date: _____ CVC Code: _____ Billing Zip: _____

Signature: _____

Please RSVP by December 5, 2019.

Confirmation and directions will be mailed upon receipt of your reservations.



Complete Reservation Form & mail copy w/payment or fax to:
413 Euclid Ave. Brielle, NJ 08730
P: (732) 292-1051 F: (732) 292-1041 | mtanj.org | info@mtanj.org