

Recognition Banquet

Reserve Table Request

Friday, July 22nd
7:00 p.m.—10:00 p.m.



Organization/Name _____

Email _____ Phone _____

Banquet Hall layout on second page.

Call 850-942-1900 to see which tables are still available.

Two Options

Full Table (10 Seats) \$100	\$ _____	Requested Table #(s) _____
Half Table (5 Seats) \$50	\$ _____	Requested Table # _____
TOTAL ENCLOSED	\$ _____	

Payment Information:

____ Check Enclosed (Make Payable to FSMS) ____ VISA/MasterCard/AE
Card #: _____ Exp. Date: _____ CVV: _____

Billing Address of Credit Card:

E-mail completed form to education@fsms.org or
Mail this form with a check to: FSMS, P.O. Box 850001-243, Orlando, FL 32885