

RSVP Form

I/We _____ will be attending all or part of the New
Name(s)

Orleans 2018 Surgeons' Travel Club meeting

Events:

Thursday Evening Cocktail Party & Dinner at the Windsor Court _____
(1 or 2)

Friday Evening Cocktail Party & Dinner at Restaurant August _____
(1 or 2)

Saturday Evening Cocktail Party & Dinner at Commanders Palace _____
(1 or 2)

Friday New Orleans School of Cooking Hands-on Class & Lunch _____
(1 or 2)

Saturday World War II Museum Lunch & Tour _____
(1 or 2)

Companion Program

Friday Morning French Quarter Tour _____
(Casual attire)

Saturday Morning Garden District Tour _____
(Casual attire)

*****I have the following dietary Restrictions (such as gluten-free, lactose-free, nut allergy, SEAFOOD allergy, vegetarian diet, vegan diet, etc):

Please return form to: Charlie Chappuis, 103 Levison Way, Lafayette, LA 70508 or scan and email to: cwc1952@yahoo.com or fax to Cynthia Glass at 337-289-5273