



Name \_\_\_\_\_ Tel \_\_\_\_\_

Address \_\_\_\_\_

Yes! I (We) will attend:

Early Bird:	\$135 per person x _____	guest(s) \$ _____
After 6/28:	\$160 per person x _____	guest(s) \$ _____
Table of 8:	\$975 per table x _____	\$ _____
Patron:	\$270 per person x _____	guest(s) \$ _____
50/50 Raffle	\$5 per ticket / 6 for \$25	\$ _____
Sorry, unable to attend but wish to donate:		\$ _____
	Total:	\$ _____

WHITEFACE LODGE

7 WHITEFACE INN LANE LAKE PLACID, NEW YORK

DINNER ENTRÉE CHOICES

PLEASE INDICATE THE NUMBER OF ENTRÉE(S) DESIRED

- \_\_\_\_\_ ROASTED CHICKEN BREAST WITH CORN COULIS
- \_\_\_\_\_ PENNE PASTA WITH ROASTED VEGETABLE ARRABBIATA,  
AND PARMESAN CHEESE
- \_\_\_\_\_ ROASTED SALMON, SPINACH AND CAPER SAUCE

IF PAYING BY CHECK, PLEASE RETURN TO:

LAKE PLACID SINFONIETTA  
PO Box 1303  
LAKE PLACID, NY 12946

IF PAYING ONLINE, PLEASE INDICATE MEAL CHOICE  
IN THE "NOTES" BOX.

**THANK YOU!**