



SHORE BUILDERS

Association of Central NJ, Inc.

OKTOBERFEST

Rain or Shine

October 14, 2020

5:30 PM - 7:30 PM

Hosted By:

KOHLER Signature Store
by General Plumbing Supply



Small Group Showroom Tours



Good Mood Good Food

158 Route 35 (North Main Street), Eatontown (across from Fort Monmouth)

This event will be outside with small tours of the showroom happening throughout the evening. Masks must be worn inside the building & all social distancing guidelines must be followed.

Enjoy a Hand Rolled Cortez Cigar!

NJBA Members \$40

Bring a non-member guest for \$25



Please help the Professional Women in Building of the Garden State once again make the Holiday Season a bit brighter for the amazing girls at Collier Group Home in Red Bank. Please consider bringing a monetary donation. Thank you - your kindness is appreciated!

Collier Group Home is a residence for teenage girls who are unable to live in their own homes due to significant and longstanding personal or family issues. The girls live together in a warm, attractive setting where they interact with each other and supportive adults. Staffed twenty-four hours a day by professional counselors, the residence provides a stable and affirming environment in which girls prepare to return to their homes or independent living.



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General Membership Meeting Reservation Form

6:00 pm, Wed., October 14, 2020

Kohler Signature Store by General Plumbing Supply
Registration Fee

\$40 Per Person Non NJBA Member Guests \$25

PAYMENT POLICY: All reservations must be paid in advance of the meeting. There will be no billing. Payments will not be accepted at the door.
CANCELLATION POLICY: If you need to cancel your reservation, you MUST call the Association by October 9th or you will be charged. NO SHOWS WILL BE BILLED.

Company: _____ Contact: _____

Phone: _____ Fax: _____ Email: _____

The following individuals will attend (*you must provide a name for each individual attending*)

Name(s): _____

Total # of reservations: _____ at **\$40** each Total # of non-member guests _____ at **\$25** each

Enclosed is my check in the amount of \$ _____ made payable to: SBACNJ

Please charge my: _____ Visa _____ MasterCard _____ Amex in the Amount of \$ _____


Number: _____ Exp. Date: _____

Name: _____ Signature: _____

Credit Card Billing Address: _____


Please Note: A convenience fee of 5% for American Express and 2% for Visa/MasterCard will be added to all credit card payments.

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