



General Membership Meeting Reservation Form

5:30 pm, Thursday, November 13th Avalon Flooring, Ocean Township

\$40. Per Member

Bring a Prospective Member For Free

Company:		Contact:	
Phone:	Fax:	Email:	
The following individuals will a	ttend <i>(you must pro</i> v	vide a name for each individual attending)	
Name(s):			
Total # of reservations: a	at \$40 Prosp	pective member:	
		t of \$ made payable to: SBACNJ North, Lakewood, NJ 08701	
Please charge my:	_ Visa Maste	rCardAmex in the Amount of \$	
Number:		Exp. Date:	
Name:		Signature:	
Credit Card Billing Address:			

Please Note: A convenience fee of 5% for American Express and 3% for Visa/MasterCard will be added to all credit card payments.



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<u>PAYMENT POLICY:</u> All reservations must be paid in advance of the meeting. There will be no billing. Payments will not be accepted at the door.

<u>CANCELLATION POLICY:</u> If you need to cancel your reservation, you MUST call the Association by November 7th or you will be charged. NO SHOWS WILL BE BILLED.