

ETFO-YR Annual Dinner, Thursday, June 22, 2017

Please use this form for single or multiple registrations. Send the entire form along with a cheque for \$18.00 and a cheque for \$50.00 (no cash) payable to ETFO-YR for **each** registration to the ETFO-YR office by **June 1st, 2017**. Forms with insufficient payment attached will be returned. This event is open to **ETFO-YR members only (permanent contract teachers)**. Seating will be prearranged. Groups of less than 10 will be seated with other groups. Groups of more than 10 will be seated at adjacent tables. **Please indicate preferred splits** (eg. A group of 12 may be 10+2, 9+3, 8+4, 7+5, or 6+6).

Please indicate preferred split for groups of more than 10 _____.

1. Name: _____ School: _____
Choice of (pick 1) **Combo Beef & Chicken** _____ **Vegetarian** _____ **Kosher** _____

Please indicate if you are being recognized for the following:
Retiring: _____ 25-yr pin: _____
Masters/Doctorate: _____

2. Name: _____ School: _____
Choice of (pick 1) **Combo Beef & Chicken** _____ **Vegetarian** _____ **Kosher** _____

Please indicate if you are being recognized for the following:
Retiring: _____ 25-yr pin: _____
Masters/Doctorate: _____

3. Name: _____ School: _____
Choice of (pick 1) **Combo Beef & Chicken** _____ **Vegetarian** _____ **Kosher** _____

Please indicate if you are being recognized for the following:
Retiring: _____ 25-yr pin: _____
Masters/Doctorate: _____

4. Name: _____ School: _____
Choice of (pick 1) **Combo Beef & Chicken** _____ **Vegetarian** _____ **Kosher** _____

Please indicate if you are being recognized for the following:
Retiring: _____ 25-yr pin: _____
Masters/Doctorate: _____

5. Name: _____ School: _____
Choice of (pick 1) **Combo Beef & Chicken** _____ **Vegetarian** _____ **Kosher** _____

Please indicate if you are being recognized for the following:
Retiring: _____ 25-yr pin: _____
Masters/Doctorate: _____

6. Name: _____ School: _____
Choice of (pick 1) **Combo Beef & Chicken** _____ **Vegetarian** _____ **Kosher** _____

Please indicate if you are being recognized for the following:
Retiring: _____ 25-yr pin: _____
Masters/Doctorate: _____

7. Name: _____ School: _____
Choice of (pick 1) **Combo Beef & Chicken** _____ **Vegetarian** _____ **Kosher** _____

Please indicate if you are being recognized for the following:
Retiring: _____ 25-yr pin: _____
Masters/Doctorate: _____

8. Name: _____ School: _____
Choice of (pick 1) **Combo Beef & Chicken** _____ **Vegetarian** _____ **Kosher** _____

Please indicate if you are being recognized for the following:
Retiring: _____ 25-yr pin: _____
Masters/Doctorate: _____

9. Name: _____ School: _____
Choice of (pick 1) **Combo Beef & Chicken** _____ **Vegetarian** _____ **Kosher** _____

Please indicate if you are being recognized for the following:
Retiring: _____ 25-yr pin: _____
Masters/Doctorate: _____

10. Name: _____ School: _____
Choice of (pick 1) **Combo Beef & Chicken** _____ **Vegetarian** _____ **Kosher** _____

Please indicate if you are being recognized for the following:
Retiring: _____ 25-yr pin: _____
Masters/Doctorate: _____