

Indiana Society of Chicago Foundation, Inc.

P.O. BOX 46129 CHICAGO, ILLINOIS 60646-0129

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RESERVATION REQUEST 112th ANNIVERSARY DINNER SATURDAY, DECEMBER 2, 2017

Fairmont Millennium Park Hotel Chicago – Imperial Ballroom
200 North Columbus Drive, Chicago, Illinois 60601 (312) 565-8000

Enclosed is my check in the amount of \$_____. This covers payment for _____ Member(s) at **\$200.00** each,
_____ Guest(s) at **\$250.00** each, _____ Guest(s) **under** the age of 35 at **\$125** each, _____ Hanover Alums at **\$200** each

The names in my party are:

1) _____ 6) _____
2) _____ 7) _____
3) _____ 8) _____
4) _____ 9) _____
5) _____ 10) _____

OR: YOU MAY PAY WITH A CREDIT CARD: _____ Visa _____ Mastercard _____ AMEX _____ DISCOVER

Card # _____ CVV #: _____ Exp: _____ Signature: _____

PLEASE DESIGNATE THE ABOVE RESERVATIONS AS M (MEMBER), G (GUEST) OR HA (HANOVER ALUM)

Please seat me (us) with:

If I am unable to furnish the names of my Guests at this time, I will submit them to you **NO LATER** than November 20th, in order to have these names appear in the printed program.

NAME: _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____ **TEL:** _____

EMAIL ADDRESS: _____

Although there is no limit on the number of guests, the maximum capacity for each individual table is ten persons.
No refunds will be made for cancellations received after November 28, 2017 - however, substitutions will be accepted.

If you wish to make an additional tax-deductible donation to benefit the Indiana Society of Chicago Foundation, Inc.
please check here and indicate the amount of your contribution: \$_____.

HOTEL RESERVATIONS: You may call Fairmont Reservations directly at 1- 800- 526-2008, and reference the Indiana Society of Chicago. Or...you may make reservations by using this form, and faxing it to our office at 847-674-7366. Our rate at the Fairmont Millennium Park Hotel Chicago is \$238 single or double. For multiple reservations, please attach a list with arrival & departure dates.

Name: _____ Address: _____

City: _____ State: _____ Zipcode: _____

Phone: _____ email: _____

Arrival Date: _____ Departure Date: _____ Single: _____ Double: _____

Credit Card #: _____ exp: _____ Signature: _____

You may fax this form to 847- 674-7366, or scan and email to: IndianaSociety@aol.com