

AMERICA-ITALY SOCIETY OF PHILADELPHIA

**Day Trip to New York City
Thursday, March 27, 2008**

RESERVATION FROM

Please complete this form and return to the America-Italy Society of Philadelphia. Participation is limited, so please reserve early. Payment is due in full by March 19, 2008.

TOUR COST (member of AIS) \$115 x _____ person(s) \$ _____

GUEST RATE (nonmember) \$125 x _____ person(s) \$ _____

TOTAL BALANCE DUE \$ _____

PARTICIPANT INFORMATION

Name _____

Address _____

Daytime telephone _____ Email _____

Cell phone _____

GUEST INFORMATION

Name _____

Address _____

Daytime telephone _____ Email _____

Cell phone _____

Please check here if you want us to reserve a table for _____ people at the Morgan Dining Room. If you do not check here we will expect you to eat in the Café.

**America-Italy Society of Philadelphia
1420 Walnut Street – Suite 310
Philadelphia, PA 19102
Tel: 215-735-3250
Fax: 215-735-7604
Email: americaitalysociety@rcn.com**

www.america-italysociety.com