

Name: _____
Team Affiliation: _____

22nd National Tournament of Academic Excellence – June 13-16, 2009

ADDITIONAL CLOSING DINNER TICKET BILLING PROCEDURE FORM

This form and payment are **due MAY 8, 2009**. PURCHASE ORDERS MAY BE SUBMITTED.

Make checks or purchase orders payable to: **The School Board of Polk County**

Mail to: Lisa W. Rawls
Academic Competitions
P.O. Box 391
Bartow, FL 33831-0391

TELEPHONE: (863) 968-5168
FAX: (863) 968-5169
Street Address: 2550 Havendale Blvd. NW
Winter Haven, FL 33881

e-mail: lisa.rawls@polk-fl.net

- All meals, including the closing dinner, scheduled in the Convention Center are included in a FULL registration.
- Additional closing dinner tickets are available at a cost of \$60.00 each.

Line 1: Additional closing dinner tickets @ \$60.00 _____ \$60.00 _____

Line 2: **Balance due MAY 8, 2009** _____

Include tickets with team registration packet? YES or Mail to address below
Please check one box

NOTE: *Every effort is made to seat teams and family members together; however, tables seat a maximum of twelve.*

Dinner tickets with seating assignment and driving directions will be mailed using the information below.

Name: _____
Mailing Address: _____
City/State/ZIP _____
E-mail: _____

Special Menu Request?	Vegetarian	Name: _____
Special Menu Request?	Vegetarian	Name: _____
Special Menu Request?	Kosher	Name: _____
Special Menu Request?	Kosher	Name: _____