

COASTAL SENIOR COLLEGE

*University College at Rockland
91 Camden Street, Suite 402
RocklandME 04841*

SPECIAL EVENTS & FIELD TRIP REGISTRATION FORM

Name: _____

Telephone: _____

Address: _____

Email Address: _____

Event: 2015 CSC Luncheon **Tickets are** **\$24.00**

Date of Event: Friday, May 29 2015 **Time of Event:** 11 am

and type of Tickets Purchased

_____ **members** _____ **non-members**

Lunch choice: _____ **Vegetarian Stirfry** _____ **Chicken Piccata**

Amount Enclosed/Received: _____

Payment Type: _____ **Credit Card** _____ **Check** _____ **Cash**

Credit Card # _____ **Exp.Date** _____