

SAIL AWAY 2017 FOOD SELECTIONS

Direct any Food Questions to: **Bobbie Draves** bdraves@verizon.net

NAME: _____ PHONE: _____

WELCOME SOCIAL: THURSDAY from 9:00 pm to 10:00 pm **FREE!!**
 Light refreshments will be served. All attendees and guests are encouraged to attend.
 Indicate number attending _____

Lunch Options: Choose 1 from Each Column

1.	<p>FRIDAY BOX LUNCH (Choose Sandwich <u>or</u> Veggie Wrap - and Drink):</p> <p><i>Deli Sandwich Selection:</i></p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Turkey</td> <td><input type="checkbox"/> Rye</td> <td><input type="checkbox"/> Swiss</td> </tr> <tr> <td><input type="checkbox"/> Roast Beef</td> <td><input type="checkbox"/> Whole Wheat</td> <td><input type="checkbox"/> Provolone</td> </tr> <tr> <td><input type="checkbox"/> Ham</td> <td><input type="checkbox"/> Sourdough Roll</td> <td><input type="checkbox"/> American</td> </tr> <tr> <td></td> <td><input type="checkbox"/> White</td> <td></td> </tr> </table> <hr style="border-top: 1px dashed black;"/> <p><input type="checkbox"/> Grilled Veggie Wrap with Balsamic Dressing</p>	<input type="checkbox"/> Turkey	<input type="checkbox"/> Rye	<input type="checkbox"/> Swiss	<input type="checkbox"/> Roast Beef	<input type="checkbox"/> Whole Wheat	<input type="checkbox"/> Provolone	<input type="checkbox"/> Ham	<input type="checkbox"/> Sourdough Roll	<input type="checkbox"/> American		<input type="checkbox"/> White		<p><u>Drink Selection:</u></p> <p><input type="checkbox"/> Water</p> <p><input type="checkbox"/> Regular Soda</p> <p><input type="checkbox"/> Diet Soda</p> <p><i>Each lunch includes: Chips, Fruit, Brownie, Condiments on the Side</i></p>
<input type="checkbox"/> Turkey	<input type="checkbox"/> Rye	<input type="checkbox"/> Swiss												
<input type="checkbox"/> Roast Beef	<input type="checkbox"/> Whole Wheat	<input type="checkbox"/> Provolone												
<input type="checkbox"/> Ham	<input type="checkbox"/> Sourdough Roll	<input type="checkbox"/> American												
	<input type="checkbox"/> White													
	<p>SATURDAY BOX LUNCH (Choose Sandwich <u>or</u> Veggie Wrap - and Drink):</p> <p><i>Deli Sandwich Selection:</i></p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Turkey</td> <td><input type="checkbox"/> Rye</td> <td><input type="checkbox"/> Swiss</td> </tr> <tr> <td><input type="checkbox"/> Roast Beef</td> <td><input type="checkbox"/> Whole Wheat</td> <td><input type="checkbox"/> Provolone</td> </tr> <tr> <td><input type="checkbox"/> Ham</td> <td><input type="checkbox"/> Sourdough Roll</td> <td><input type="checkbox"/> American</td> </tr> <tr> <td></td> <td><input type="checkbox"/> White</td> <td></td> </tr> </table> <hr style="border-top: 1px dashed black;"/> <p><input type="checkbox"/> Grilled Veggie Wrap with Balsamic Dressing</p>	<input type="checkbox"/> Turkey	<input type="checkbox"/> Rye	<input type="checkbox"/> Swiss	<input type="checkbox"/> Roast Beef	<input type="checkbox"/> Whole Wheat	<input type="checkbox"/> Provolone	<input type="checkbox"/> Ham	<input type="checkbox"/> Sourdough Roll	<input type="checkbox"/> American		<input type="checkbox"/> White		<p><u>Drink Selection:</u></p> <p><input type="checkbox"/> Water</p> <p><input type="checkbox"/> Regular Soda</p> <p><input type="checkbox"/> Diet Soda</p> <p><i>Each lunch includes: Chips, Fruit, Brownie, Condiments on the Side</i></p>
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<input type="checkbox"/> Ham	<input type="checkbox"/> Sourdough Roll	<input type="checkbox"/> American												
	<input type="checkbox"/> White													

Place the Number of Lunches _____ x \$18.00 EA. On Line 2 1. \$ _____

2.	<p>SATURDAY BANQUET: Choose 1 from Each Column <i>(Includes: Salad, Starch, Vegetable, Rolls and Butter, Coffee/Tea)</i></p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;"><input type="checkbox"/> Breast of Chicken Supreme, filled with Sage Dressing</td> <td style="width: 50%;"><input type="checkbox"/> Chocolate Mousse Cake</td> </tr> <tr> <td><input type="checkbox"/> Broiled Salmon with Dill and Lemon</td> <td><input type="checkbox"/> Carrot Cake</td> </tr> </table> <hr style="border-top: 1px dashed black;"/> <p>Note: Your cost is included with your registration. You pay <u>only</u> for guest/s. If you have banquet guests, use the back of this form to indicate their names/dinner selections.</p>	<input type="checkbox"/> Breast of Chicken Supreme, filled with Sage Dressing	<input type="checkbox"/> Chocolate Mousse Cake	<input type="checkbox"/> Broiled Salmon with Dill and Lemon	<input type="checkbox"/> Carrot Cake
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<input type="checkbox"/> Broiled Salmon with Dill and Lemon	<input type="checkbox"/> Carrot Cake				

Place the Number of **Banquet Guests** _____ x \$42.00 EA. On Line 3 2. \$ _____

TOTAL FOR LINES 1 AND 2 TO BE
 ENTERED ON YOUR REGISTRATION FORM.....TOTAL \$ _____

Dietary Restrictions:

SAIL AWAY GUEST/S - FOOD SELECTION

Direct any Food Questions to: **Bobbie Draves** bdraves@verizon.net

YOUR NAME: _____ PHONE: _____

THURSDAY EVENING SOCIAL:	Guest 1: _____
	Guest 2: _____
	Guest 3: _____
	Guest 4: _____

BANQUET GUEST 1:	GUEST
Choose 1 from Each Column:	NAME: _____
<i>(Includes: Salad, Starch, Vegetable, Rolls and Butter, Coffee/Tea and dessert)</i>	
<input type="checkbox"/> Breast of Chicken Supreme, filled with Sage Dressing	<input type="checkbox"/>
<input type="checkbox"/> Broiled Salmon with Dill and Lemon	<input type="checkbox"/>

BANQUET GUEST 2:	GUEST
Choose 1 from Each Column:	NAME: _____
<i>(Includes: Salad, Starch, Vegetable, Rolls and Butter, Coffee/Tea and dessert)</i>	
<input type="checkbox"/> Breast of Chicken Supreme, filled with Sage Dressing	<input type="checkbox"/>
<input type="checkbox"/> Broiled Salmon with Dill and Lemon	<input type="checkbox"/>

BANQUET GUEST 3:	GUEST
Choose 1 from Each Column:	NAME: _____
<i>(Includes: Salad, Starch, Vegetable, Rolls and Butter, Coffee/Tea and dessert)</i>	
<input type="checkbox"/> Breast of Chicken Supreme, filled with Sage Dressing	<input type="checkbox"/>
<input type="checkbox"/> Broiled Salmon with Dill and Lemon	<input type="checkbox"/>

Guest Dietary Restrictions:
