Reservation Form

$119^{ m th}$ Annual Reunion Botsford Family Historical Association $42^{ m nd}$ Annual Reunion Platt Family Association

Adult's Names:

Children's Names & Ages:								
Address:			•					
City:				State:		Zip		
Email:								
Number Attending – Adults:				Children:				
Please enclose \$ 15.00 Registration Fee (includes Saturday lunch) for Each Adult, We can accommodate gluten-free and dairy-free meal requests.								
Adult	t Child All selections include a bag of chips and Fresh-bake				ted Cookies			
			Smoked Turkey Club Sandwich with Bacon, American Cheese, L/T, Mayo on Ciabatta					
	Shaved Roast Beef Sandwich, with Swiss Cheese, Lettuce & Tomato, Dijon Mustard on Ciabatta							
	Grilled Veggie Sandwich with Sun-dried Tomato Aioli, Lettuce & Tomato on Ciabatta							
How many will be attending the Friday Evening Reception at the Homestead?								
Please return this form with payment by July 1,2023 to:						Tot	tal Enclosed:	
Noelle Johnson								
49 Danny's Way								
Wallingford, CT 06492 Please make checks payable to "Botsford Family Historical Association"								
Email: noe	Email: noellebjohnson@msn.com or call (203) 284-9007 if you have any questions.							