

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

___ Individual Ticket(s) @ \$75 Each\$ _____

___ Individual(s) Lunch Only @ \$20 Each\$ _____

___ RGS Membership(s) @ \$35 Each\$ _____

AMOUNT ENCLOSED\$ _____

Cash Check Credit Card # _____ Exp. _____

Billing Address _____ City _____ State _____ Zip _____

Mail To:

**Carole Dyer
1058 River Rd.
Bowdoinham, ME 04008**

*Please Make Checks
Payable To: RGS*

