DINNER RESERVATIONS

Please print the following information. Submit a separa	te reservation form for each dinner.
Name:	
Address:	
Primary Telephone:	Cell phone:
Email:	
Check off the dinner (s) you wish to attend:	
☐ Celebration Dinner ☐ Chef's Choice	☐ Fish Dinner ☐ Porchetta Dinner
Stuffed Peppers	Christmas Party
Enter Poyment for Dinner (e).	

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DINNERS							
ICC Member		ICC Non-Member					
	Cost Per Dinner	# of Diners	Total		Cost Per Dinner	# of Diners	Total
Adult	\$18			Adult	\$21		

Total amount payable: \$_____

Make your check payable to: Italian Cultural Center

Mail check with reservation form to:
Italian Cultural Center
Attn: Dinners
56 Margaret Street
Springfield, MA 01105