

Meal Information Sheet
North Georgia Conference Annual Conference
June 11 – 14, 2019 (Tuesday – Friday)

Name of Group: _____

Date of Meal: _____ Time of Meal: _____

Location of Meal: _____ Classic Center; _____ Other specify: _____

Will “tickets” be sold at Annual Conference? _____ no; _____ If yes, location _____

Contact Responsible for reservations prior to Annual Conference:

Name: _____
Address: _____
Email: _____
Cell: _____ Office/Home: _____

Contact available for questions at Annual Conference:

Name: _____
Address: _____
Email: _____
Cell: _____ Office/Home: _____

Complete for Classic Center Catering only:

Estimated number of guests: _____

Type of Meal: _____ Breakfast Buffet; _____ Lunch Buffet; _____ Dinner Buffet; _____ Reception
_____ Breakfast Served; _____ Lunch Served; _____ Coffee & Danish

Name Responsible for Catering Bill:

Name: _____
Address: _____
Email: _____
Cell: _____ Office/Home: _____

Deadline for Publication in Conference Handbook: March 25, 2019.

Email – form to:

Elaine Puckett, Meal Coordinator
Email: elaine.puckett@ngumc.net
Phone: 404-374-8676

NOTE: meal locations are not assigned until all requests are received.