

MEAL REGISTRATION FORM

For the Saturday night meal – ONE FORM PER PERSON

Please print and email this form to lisasking1010@gmail.com and maryathsn@yahoo.com

Name: _____ Club Name: _____

Please select only 1 Entree

() Smoked Chicken – includes:

- 2 Legs & 1 Thigh
- Dirty Rice
- Collard Greens

() Pulled Pork – includes:

- Baked Beans
- Green Beans

() Vegetarian's Meals Selection – includes:

- Macaroni and Cheese
- Green Beans
- Cabbage

Drinks (Please select 1)

- () Sweet Tea
- () Lemonade
- () Bottled Water