Meal Reservation Form
River's Edge Convention Center (Ramada)
265 33rd Avenue
Columbus NE 68601
(402) 564-1492
IPSD Tony Hergott Testimonial Dinner
DECEMBER 2, 2017

SATURDAY EVENING TESTIMONIAL DINNER: **NUMBER**
(Please send payment with reservation.)

Dinner $29.50 _____

Total enclosed: **$_____**

Reservations must be **received by November 25th, 2017**. I understand that I am responsible for the cost of the meal if I do not cancel my reservation by **November 28th, 2017** by contacting Rob Ostdiek at 2120 S. 4th Ave, Beatrice NE 68310. If practical, scan/email form to convention@nebraskakofc.org in advance for ease of planning.

Date: _____ _____
(Printed Name)

_____
(Signature)

_____
(Title/Position)

_____
(Council #/City)

_____
(Email/phone to provide confirmation)