



## MID-ATLANTIC CHAPTER

Please join the members of the Mid-Atlantic Chapter for dinner  
and an evening of fun and merriment at  
**San Felipe's Cantina** at the Desert Ridge Market Place in Phoenix.

**DATE: October 6, 2009, Tuesday evening**

**TIME: 5:30 PM**

**COST: \$40 per person (tax and gratuity already included)**

We will meet in the hotel lobby at **5:00 PM**. The restaurant is a short walk from the hotel.

A wide variety of delicious appetizers will be served. Five dinner options (one to please everyone's taste and appetite) and two alcoholic drinks will be included.

Please complete the attached Payment Form to register and return it to Stacy Patacsil at the contact information provided. Payment must be made by **September 25, 2009**.

We are all looking forward to catching-up and celebrating at the **CANTINA!** ☺

**AICP Mid-Atlantic Chapter  
San Felipe's Cantina  
PAYMENT FORM**

Name: \_\_\_\_\_ Company: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Name: \_\_\_\_\_ Company: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Name: \_\_\_\_\_ Company: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

I am paying by check - make check payable to "AICP - Mid-Atlantic Chapter"

Amount Enclosed: \_\_\_\_\_

I am paying by credit card:  Visa  Mastercard  American Express

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Name as it appears on the card: \_\_\_\_\_

Amount to be Charged: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Send checks or credit card request to:  
Stacy Patacsil  
Eastern Life & Health Insurance Company  
25 Race Avenue  
Lancaster, PA 17603  
Phone: 717-391-5718 Fax: 717-481-8238  
Email: [Spatacsil@elhins.com](mailto:Spatacsil@elhins.com)

Credit card information may also be faxed

**PLEASE SEND PAYMENT BY SEPTEMBER 25, 2009**