

Greek Orthodox Metropolis of Chicago Western Region Family Basketball 2011 Tournament

February 11-13, 2011

**St. George Greek Orthodox Church
Host Parish
2930-31 Avenue
Rock Island, IL 61201
(309)786-8163**



Meal Registration Form

All players must purchase a Weekend Package. A \$20 late fee will be assessed per person on any and all meal prices (including a la carte) if your registration is not postmarked by **January 28, 2011**.

- Adult Weekend Package.\$ 70.00 each**
- Children 12 and under Weekend Package\$ 45.00 each**
- A la Carte - Friday buffet (includes dance).....\$ 35.00 for adults / \$20.00 for children**
- A la Carte - Saturday banquet (includes dance).....\$ 45.00 for adults / \$30.00 for children**
- A la Carte Sunday box lunch.....\$ 20.00**

Please fill in the next page with your check made out to: **St. George Greek Orthodox Church** and mail it to:

Adrienne Johnson
3516-52 Street
Moline, IL 61265

Meal Registration Form

of Adult Weekend Package x \$70.00 = _____

of Children 12 and under Weekend Package x \$45.00 = _____

of A la Carte - Adult Friday buffet (includes dance)..... x \$35.00 = _____

of A la Carte - Child's Friday buffet..... x \$20.00 = _____

of A la Carte - Adult Saturday banquet (includes dance)..... x \$45.00 = _____

of A la Carte - Child's Saturday banquet..... x \$30.00 = _____

of Sunday box lunches..... x \$10.00 = _____

GRAND TOTAL = _____

Your Parish Church: _____

Your Home Address: _____

Name of Attendees (Non-Players):

1. _____

2. _____

3. _____

4. _____

5. _____

Name of Attendees (Players):

1. _____

2. _____

3. _____

4. _____