



**AzFRW 2017 Winter  
MEETING REGISTRATION  
FRIDAY & SATURDAY,  
FEBRUARY 10-11, 2017**

**WINDEMERE HOTEL & CONFERENCE CENTER  
2047 S. HIGHWAY 92, SIERRA VISTA, AZ 85635**



**PLEASE NOTE  
REGISTRATION  
DATES & FEES.**

**AzFRW Hotel Block—Call direct 520-459-5900  
Rate: \$89 plus taxes. **RATE INCLUDES BREAKFAST!**  
Room Block Deadline: **Jan. 26.**  
<http://windemerehotel.com/>  
<http://visitsierravista.com/>**



Please mail Registration with remittance to:  
**Kathy Dolge, Arrangements Chair**  
3607 Camino Bella Rosa, Sierra Vista, AZ 85650  
Questions or special needs? Contact Kathy at  
602-510-8986 or [Arrangements@azfrw.com](mailto:Arrangements@azfrw.com)

<input checked="" type="checkbox"/>	<b>MEETING REGISTRATION FEES:</b>		
	Early Bird! <i>Register by Jan, 12</i>	\$25	
	Postmarked between <i>Jan.13 - Jan.26</i>	\$35	
	Postmarked on or after <i>Jan. 27</i>	\$50	
	<b>FRIDAY LUNCHEON ENTRÉES:</b>		
	<b>GRILLED FLAT IRON STEAK</b> with Chimichurri Sauce	\$30	
	<b>BABY ROMAINE CAESAR SALAD WITH GRILLED CHICKEN</b>	\$30	
	<b>LINGUINE</b> w/mushrooms, onions, green peppers, garlic butter & white wine sauce	\$20	
	<b>SATURDAY LUNCHEON ENTRÉES:</b>		
	<b>SAUTÉED CHICKEN BREAST</b> with Fine Herb Cream Sauce	\$30	
	<b>APPLE &amp; GORGONZOLA SALAD</b> with GRILLED SHRIMP	\$30	
	<b>SEASONED GRILLED VEGETABLES</b> (squash, eggplant, carrots & onions)	\$20	
	<b>VENDOR TABLES:</b>		
	Club Name (Club Realizes all Profits)	\$10	
	Club Member (Member Realizes all Profits)	\$25	
	Non-Member Vendor or <u>Any</u> Candidate	\$50	
<b>Total:</b>			\$
<i>Please make checks payable to: AzFRW</i>			

<b>Name:</b>	<b>Phone:</b>
<b>Email:</b>	<b>Club:</b>
<input checked="" type="checkbox"/> <b>Please check and complete all applicable items below:</b>	
<input type="checkbox"/>	Check if this your first time to attend an AzFRW State Meeting
<input type="checkbox"/>	Check if you hold elected office (Federal, State, Co, Local ) <b>Office:</b> _____
<input type="checkbox"/>	Check if you are a Club officer and please indicate your title: _____
<input type="checkbox"/>	Check if you are a candidate, please indicate office you are seeking: _____
<input type="checkbox"/>	Guest name (if any): _____
<b>(Submit a separate form for each guest but may remit with one check)</b>	

To pay by credit card, please check box and **call AzFRW Treasurer Susan Marcell** 602.370.3435 with CC information for processing. **Mail or email Registration to Arrangements Chair Kathy Dolge** with your information and menu choices. **Credit/debit payments will be plus 4%.**  
**A reservation made is a reservation paid. AzFRW members must remit the registration fee to attend.**