

Culinary Institute of America Field Trip

Tuesday, April 16, 2024

Registration Form

CLUB NAME	

MEMBER NAME: _____

ATTENDEES FULL NAME: (Please Print)

 1.

 2.

 3.

 4.

 5.

Your payment is your reservation. Payment deadline is April 6th.

Please make your check for \$125.00 per person payable to NJCMA and mail to:

NJCMA

PO Box 549

Franklin Lakes, NJ 07417

Amount Enclosed:	