



Massachusetts Systems Contractors Association, Inc.
"Representing and Educating the Electronic Systems Industry since 1978"
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Email: office@msca-systems.org ~ Website: www.msca-systems.org

RESERVATION INFORMATION

Company Name: _____

Number of Dinner Attendees: _____

Names of Attendees: _____

PAYMENT INFORMATION

RAFFLE TICKETS: 1 for \$5 3 for \$10 Arm's Length for \$20

PAYMENT METHOD: ___ Cash ___ Check ___ Credit Card (Please complete information below)

CREDIT CARD TYPE: ___ MasterCard ___ Visa ___ American Express TOTAL AMOUNT DUE: _____

CREDIT CARD NUMBER: _____ EXPIRATION DATE: _____

NAME ON CREDIT CARD: _____ SECURITY CODE: _____

BILLING ZIP CODE: _____ PHONE NUMBER: _____

SIGNATURE: _____ EMAIL (required): _____

Holiday Inn and Suites of Marlborough, MA
265 Lakeside Avenue
Marlborough, MA 01752
(508) 481-3000

DATE: TUESDAY, OCTOBER 16, 2018
TIME: 5:30PM – SOCIAL HOUR / 6:00PM – DINNER BEGINS
FEE: \$50 PAID IN ADVANCE / \$60 NO RESERVATIONS

RESERVATIONS ARE ESSENTIAL
Please complete the RESERVATION FORM and
FAX: (781) 784-2909 OR EMAIL: office@msca-systems.org