

***Northeastern New York CPCU Society Chapter, Inc.***

PO Box 14793

Albany. NY 12212-4793

**DINNER MEETING INVITATION**

**When:** Thursday, November 12, 2015

**Where:** Shaker Ridge Country Club

Albany Shaker Road – Adjacent to Hilton Garden Inn

**Time:** 5:30 PM Networking & Appetizers

6:15 PM Dinner Served

**Program Speaker**: Jill Haynes Gidge, CPCU Area Governor (See Bio)

**Topic:** Update on Annual Meeting & Conferment in Indianapolis, Motivation,

Recognize New Designees, Install 2016 Board

**Cost:** $35 per person

**Appetizers:** AssortedCheeses, Crackers, Breads, Vegetable Crudite & Cocktail Meatballs

Including 1 Drink (Beer, Wine, Mixed Drink or Soda)

**Dinner Selections:** Rosemary Roasted Pork Loin, Baked Salmon **or** Parmesan Encrusted Chicken

Served with Tossed Salad, Rolls and Butter, Roasted Red Potatoes, Fresh Green Beans,

Chocolate Mousse, Coffee and Tea

**RSVP:** by Noon, Monday, November 9th to [tammy.fembleaux.a6aa@statefarm.com](file:///C:\Users\pcrawfor\AppData\Local\Microsoft\Windows\Temporary%20Internet%20Files\Content.Outlook\A6MFHVEP\tammy.fembleaux.a6aa@statefarm.com) or fax to 518-884-6020, Attn: Tammy Fembleaux You will be responsible for the cost of the meal for any cancellation received after November 9th.

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Pork 🞎 Salmon 🞎 Chicken 🞎

Company \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Company \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Accepted Forms of Payment:** Credit cards and checks payable to NENY CPCU Society Chapter Inc. Checks and credit card payments will be accepted at the meeting or please mail invitation with completed information below with your check to: NENY CPCU Society Chapter Inc., PO Box 14793, Albany, NY 12212-4793. For security reasons, do not send credit card information through the mail or fax.

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| Total $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Charge to 🞎 AmEx 🞎 Discover 🞎 Visa 🞎 MasterCard   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Exp.  Date |  |  |  |  | Verif.  No. |  |  |  |  |   Cardholder’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

“In accordance with the Title III of the Americans with Disabilities Act, we invite all registrants to advise us of any disability and any requests for accommodation to that disability. Your request should be submitted as far in advance of the program you wish to attend.”

[www.nenewyork.cpcusociety.org](http://nenewyork.cpcusociety.org/)

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