

REGISTRATION BY CHECK

Pay by Check Registration:

To register and pay by check, fill out this form and mail it with payment to:
WFSO, c/o William Maginnis
220 NW Second Ave., Suite 1000
Portland, OR 97209



Event Date/Name _____

Number of Members _____ x \$ _____ = \$ _____

Number of Guests _____ x \$ _____ = \$ _____

of Nondrinkers (if an option) _____ x \$ _____ = \$ _____

Total Due \$ _____

Member Names _____

Guests Names _____

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