

# MEAL TICKET PURCHASE FORM

I will **not** be staying at the Best Western Inn & Conference Center.

Name \_\_\_\_\_

School \_\_\_\_\_

School Address \_\_\_\_\_

\_\_\_\_\_

School Phone (\_\_\_\_) \_\_\_\_\_

Level \_\_\_\_\_ B Division (Gr 6-9)      \_\_\_\_\_ C Division (Gr 9-12)

I wish to purchase meals.

Friday dinner .....\$30.00 \_\_\_\_\_

Saturday breakfast ..\$11.00 \_\_\_\_\_

Saturday lunch .....\$19.00 \_\_\_\_\_

Total..... \_\_\_\_\_

Mail completed form and check, for the total amount,  
made payable to "New York State Science Olympiad" to:

Mr. Harold Miller  
1 Lake Drive  
Valhalla, NY 10595-1944

**Individual meal tickets may be purchased on site.**

**Sorry, purchase orders and credit cards cannot be accepted.**