

Return completed form with proper payment.

Date: Saturday, December 13, 2008

Entertainment: Jeffrey James Band

Name _____

Address _____

City-State-Zip _____

Phone _____

Email _____

Seat us with _____

Total # reservations _____

Amount enclosed
(do not send cash) _____

boneless stuffed chicken breast _____ x \$35 per person = _____

stuffed baked pork chop _____ x \$35 per person = _____

fresh baked filet of haddock _____ x \$37 per person = _____

choice prime rib au jus _____ x \$40.40 per person = _____

lobster tail (8-10 ozs.) _____ x \$52.60 per person = _____

Please make checks payable to: Regal Room
(\$20 charge for bank returned checks)

216 Lackawanna Ave., Olyphant, PA 18447
(570) 489-1901, fax (570) 489-2692, www.regalroom.com