LUNCH ORDER FORM

NASA Thermal Fluids Analysis Workshop — 8/4/14-8/7/14

Lunch Meal Deal- \$11.00

Attendees will have the option to pre-purchase lunch for \$11.00, a \$25% discount from day of pricing. Attendees will receive a ticket for the purchased meal deal at registration each

morning. One ticket is equal to one lunchtime meal

to be used between 11:45am-12:15pm each day.

| Please check the days you would like to pre-purchase lunch (no substitutions | please | e |
|--|--------|---|
|--|--------|---|

| 1). Monday: Chicken Pesto Panini , chips, whole fruit |
|---|
| 2). Tuesday: Hot Ham and Swiss on Pretzel Bread, chips, whole fruit |
| 3). Wednesday: BBQ Pork Sandwich , chips, whole fruit |
| 4). Thursday: Hot Turkey and Cheddar on Wheat, chips, whole fruit |

| Quantity of Tickets | | Price per Ticket | Total |
|---------------------|---|------------------|-------|
| | X | \$11.00 | |

| Payment– please circle one: | Check or | Credit Card |
|-----------------------------|----------|-------------|
| On– Site Contact Name: | | |

Payment Information

Payment by check: Please mail checks to Levy Restaurants at 1 St. Clair Ave. Cleveland,
OH 44114

<u>Payment by credit card:</u> See attached Credit Card authorization form

Meal Deal/ Payment Deadline: Wednesday, July 23th, 2014 by 5:00pm EST

Meal deal is only available by pre-purchasing lunch.

Minimal day of event options will be available for purchase

*Tickets are only valid on specific day

*Tickets have no cash value and change will not be given

Please email order forms to: Rosemary Macey, at rmacey@levyrestaurants.com

<u>Levy Restaurants</u> <u>Credit Card Authorization</u>

NASA Thermal Fluids Analysis Workshop

Event Date: Monday August 4th-Thursday August 7th, 2014

Salesperson: Rosemary Macey, Catering Sales Manager 216-928-1555

I hereby agree that all specified charges incurred from the above event will be charged to my credit card as shown below.

| Type of Card: | Expiration Date: |
|--|------------------|
| Credit Card Number: | |
| Card Security Code: | |
| Name On Card: | |
| Billing Address: | |
| Signature | Date |
| Printed Name | Phone |
| Email address receipt should be sent to: | |