

R.S.V.P. AND TABLE CHOICE

Name _____

Guest of _____

_____ Number of guests attending

_____ Vegetarian _____ Non-Vegetarian

TABLE NUMBER CHOICE: _____

Please list the full name of each guest attending this event.

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Please return in the enclosed envelope or send to:
Indian Medical Association of Northwest Indiana
c/o Dr. Ramesh P. Kanuru
1200 Bally Bunion Court, Dyer, Indiana 46311



**The Indian Medical Association
of Northwest Indiana**

The 30th Annual IMA Gala

SATURDAY, SEPTEMBER 17, 2011

THE HALLS OF ST. GEORGE

905 E. Joliet St. • Schererville, Indiana

Enclosed please find the floor plan for our 30th Annual Gala. This year we are allowing you to choose your table based on a first come, first paid basis. You can either log onto www.niima.org and follow the table seating link or return this form with your preference before September 2, 2011.

ON THE WEB: Log onto www.niima.org and click on the table seating link. You will first select your Sponsorship Level, choose to place an ad in our Souvenir Book, and then purchase your Table of 10. After you have completed on-line payment, you will choose your table and type in the names of your guests for placards.

BY MAIL: Fill out this form and return it before September 2, 2011. Your table choice will be assigned on a first come, first paid basis. Only reservations accompanied by full payment will be given their table choice if that table is still available. If the table has already been taken, the next closest table will be assigned.

IMA 30th ANNUAL GALA — SEPTEMBER 17, 2011

Halls of St. George Floor Plan

