

BANQUET RESERVATION FORM

CONTACT NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

DAY PHONE _____ CELL PHONE _____

E-MAIL ADDRESS _____

I WAS REFERRED BY: _____

PLEASE INDICATE WHICH BANQUET YOU WILL ATTEND BY CHECKING THE BOX NEXT TO THE LOCATION. IF ATTENDING BOTH BANQUETS, PLEASE MAKE A COPY OF THIS SHEET AND FILL IN SEPARATELY.

Las Vegas Banquet Reservations
Saturday, November 8th, 12pm

Ohana/Maile Room, California Hotel & Casino, Las Vegas, NV

Honolulu Banquet Reservations
Saturday, November 15th, 6pm

Dole Cannery Ballroom—650 Iwilei Road, Honolulu, HI 96817

| BANQUET GUEST NAMES | ADULT | CHILD |
|---------------------|-----------------------|-----------------------|
| 1. _____ | <input type="radio"/> | <input type="radio"/> |
| 2. _____ | <input type="radio"/> | <input type="radio"/> |
| 3. _____ | <input type="radio"/> | <input type="radio"/> |
| 4. _____ | <input type="radio"/> | <input type="radio"/> |
| 5. _____ | <input type="radio"/> | <input type="radio"/> |
| 6. _____ | <input type="radio"/> | <input type="radio"/> |

NOTE: PRE-RESERVED TABLES FOR: NV BANQUET-PARTIES OF 8, HI BANQUET-PARTIES OF 10. PLEASE ATTACH A LIST OF YOUR GUESTS FOR RESERVED TABLES. CHILDREN ARE AGES 3–11.

RSVP BEFORE OCTOBER 3, 2008

| | | | |
|--------------------------|-------------------------------------|---------------------|------|
| LAS VEGAS BANQUET | # OF ADULTS: <input type="text"/> | X \$20.00 per adult | = \$ |
| | # OF CHILDREN: <input type="text"/> | X \$10.00 per child | = \$ |
| HONOLULU BANQUET | # OF ADULTS: <input type="text"/> | X \$15.00 per adult | = \$ |
| | # OF CHILDREN: <input type="text"/> | X \$8.00 per child | = \$ |

RSVP AFTER OCTOBER 3, 2008 (BASED ON SPACE AVAILABLE)

| | | | |
|--------------------------|-------------------------------------|---------------------|------|
| LAS VEGAS BANQUET | # OF ADULTS: <input type="text"/> | X \$25.00 per adult | = \$ |
| | # OF CHILDREN: <input type="text"/> | X \$15.00 per child | = \$ |
| HONOLULU BANQUET | # OF ADULTS: <input type="text"/> | X \$20.00 per adult | = \$ |
| | # OF CHILDREN: <input type="text"/> | X \$13.00 per child | = \$ |

| | | |
|---|--------------|------|
| PAYMENT ENCLOSED | TOTAL | = \$ |
| Make checks payable to: Adventure Bound | | |

PLEASE MAIL FORM AND CHECK TO: ADVENTURE BOUND, 1315 SOUTH KING STREET #4, HONOLULU, HI 96814-2343
 TOLL FREE: 1-800-877-9661 | PHONE: 808-593-9322 | E-MAIL: ADVENTURE.BOUND@HAWAIIANTEL.NET