

Fill out and print RSVP. Mail with check to address below.

Name(s):

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Phone: \_\_\_\_\_

No. Attending: \_\_\_\_\_

Please indicate how many of each  
choice of entrée & dessert.

- \_\_\_\_\_ Baked Salmon
- \_\_\_\_\_ Grilled Filet Mignon
- \_\_\_\_\_ Herb Crusted Italian Chicken
- \_\_\_\_\_ Chocolate Mousse Pie
- \_\_\_\_\_ Apple Pie

*\$49 Members \* \$59 Non-Members*

**RSVP by January 21, 2019**

Please make check payable to: Robert Burns Society of Annapolis  
Mail to: Karolyn St. Clair, 1754 Swinburne Ave., Crofton, MD 21114