

## NIGHT AT THE FIGHTS XXIII

#NAF2019  
Order Form

Thursday, May 30, 2019 at Camelback Inn

Please submit your guest name(s) and their company name(s) by Wednesday, May 22, 2019

Contact Name: \_\_\_\_\_

Company: \_\_\_\_\_

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

### SEATS

### Guest Name(s) & Company Name(s)

Quantity: \_\_\_\_\_ @ \$2,500 Member Half Table of Five (5)

\_\_\_\_\_ @ \$4,500 Member Table of Ten (10)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Total due: \$ \_\_\_\_\_

Please charge my credit card:  Visa  MC  AMEX

Name on Card: \_\_\_\_\_

Card #: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ / \_\_\_\_\_ Security Code \_\_\_\_\_

Billing Zip Code \_\_\_\_\_

Signature: \_\_\_\_\_

Mail payment to:  
NAIOP Arizona  
4742 N 24<sup>th</sup> St, Ste A150, Phoenix AZ 85016  
602.230.1645  
rsvp@naiopaz.org

Please note credit card transactions include a 3% processing fee.  
ALL SALES FINAL. NO REFUNDS WILL BE GIVEN.