

2025 New York Rural Letter Carriers Association Meal Plan Order Form

Please provide all the information requested below:

Name: _____

Arrival Date: _____ Departure Date: _____

Address: _____

Phone Number: _____ Email: _____

Prices are quoted per person and include NYS tax and gratuity.

Meal plan: Consists of 3 Breakfast buffets (Monday, Tuesday, and Wednesday)
And 2 Lunch Buffets (Monday Italian and Tuesday NY Deli)

Adult Number _____ x \$154.00 = _____	Special dietary Needs:
Children (6-11) _____ x \$77.00 = _____	Food Allergy _____
	Gluten Free _____
	Vegan _____
	Other _____

Sunday Ice Breaker: Have dessert with us and enjoy a local band. *Cash Bar provided*

Number Attending _____ x \$13.00 = _____

Tuesday Night Banquet Dinner: Revolutionary Themed; Dress in Revolutionary attire. We will have a comedian at 7:45 for entertainment! *Cash bar provided*

(Oven poached Salmon: Beef bourguignon: Honey Balsamic Roasted Chicken)

Adult Number _____ x \$58.00 = _____

Children (6-11) _____ x \$29.00 = _____

Payment must accompany this form.

Please make check or money order payable to: **WASAWA Convention 2025**

Mail to:

WaSaWa Convention 2025

PO Box 111

Wevertown, NY 12886

Orders must be received by June 1, 2025. So we can give a head count of how many people will be using their facility. Any questions about the meal plan, Ice Breaker, or the Banquet you can call Jenny Smith at 518-522-9476. Thank you !