

Board Members: I will attend the Board meeting_____ Will not_____

**Member
Name _____ Spouse _____**

Children / Guests _____

Address _____ Phone _____

Total in your party_____ E-Mail _____

	Number	Each		Total
Friday Night cook out	_____	@ \$36.00	=	\$ _____
Saturday Lunch	_____	@ \$13.00	=	\$ _____
Saturday Night Dinner				
Beef Tenderloin	_____	@ \$52.00	=	\$ _____
Grouper	_____	@ \$46.00	=	\$ _____

(Dinner prices include all taxes and gratuity.)

Registration Fee: Single _____ @ \$15.00 = \$ _____
Family _____ @ \$30.00 = \$ _____

Grand Total: \$ _____

Please fill out this form completely, including all names in your party. Make your check payable to DSDI and mail it back to:

**Mr. Thomas G. Heyward
Post Office Box 353
Bluffton, SC 29910**

**You must register no later than March 1, 2006 to avoid 20%
penalty.**