# Table Attendee List

|  | Name | Email | Phone | Dietary requirements |
| --- | --- | --- | --- | --- |
| TableLeader | Name | Email | Phone |  |
| 2 | Name |  |  |  |
| 3 | Name |  |  |  |
| 4 | Name |  |  |  |
| 5 | Name |  |  |  |
| 6 | Name |  |  |  |
| 7 | Name |  |  |  |
| 8 | Name |  |  |  |

Please complete this form with a list of attendees at your table and return to **bryan@brylyn.com.au**.

We require contact details for the table leader. If we don’t have individual email addresses all our correspondence will be via the table leader.

Please make payment to the Rotary Club of Caloundra Pacific Project Account

**BSB 084-484**

**Account No 39781-7640**

Please include your name as the reference.

We would appreciate it if you could pay for your team as detailed above as it will assist greatly with registration on the night.

If you have any questions, please don’t hesitate to contact: Bryan Mason on 0438 705 196