

Hearts of Miromar

Special Event Reservation

2024 – 2025 Season



Payment Details

- Please submit by mail or drop off your check to the Chairman listed for the Special Event in the weekly update
- Email heartsofmiromar@gmail.com if you have any questions regarding who should receive this form.

Member Information

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

Member: Yes _____ No _____

Special Event Information

Reservation for Month of: _____

Name of Special Event: _____

Require Alternative Meals: Yes _____ No _____

Number of Alternative Meals: _____

Name of Guests / Notes

Please list first and last name of any Guest(s) AND if someone requires an alternative meal, if specific meals have been offered, please add name and specify alternate meal.

Number of Attendees: _____

Total Event Cost : \$ _____

For the Total Event Cost, please multiply the cost of the event with the number of attendees

Enclosed is Check #: _____ Dated: _____