

# CMS Event Registration Form

Name (print): \_\_\_\_\_ Phone \_\_\_\_\_

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

Number of Persons: Adults \_\_\_\_\_

Length of Stay (check one): 7 nights \_\_\_\_\_ 4 nights \_\_\_\_\_

Airfare Deposit enclosed @ \$200/person: Yes \_\_\_\_\_ No \_\_\_\_\_ (non-refundable deposit).

MAIL form to CMS, Attn: Mary, 2401 York Road, Timonium, MD 21093 or FAX to 410-321-4980.

Please call (410-321-4267) or email Mary (mblake@cms24-7.com) to authorize payroll deductions.

Questions about the trip? Call Terri @410-321-4267 Ext 106 or email tweller@cms24-7.com.