



DEDICATED TO THE NATIONAL DEFENSE
THE SOCIETY OF AMERICAN MILITARY ENGINEERS

New York City Post

2009 SCHOLARSHIP DINNER DANCE REGISTRATION FORM

*Waldorf=Astoria Hotel, Grand Ballroom – Cocktail Reception 7:00 pm; Dinner 8:00 pm
 November 7, 2009*

Honoring

Lieutenant General Robert Van Antwerp, PE • CHIEF OF ENGINEERS, USACE

Mr. Frank Lombardi, PE • PANY&NJ CHIEF ENGINEER

Firm/Individual _____

Address _____ City/State/Zip _____

Contact Person/Title _____ E-mail _____

Telephone _____ Fax _____

Registration Deadline: OCTOBER 12, 2009

- PLEASE INDICATE NUMBER
- _____ **\$17,500:** Event Sponsorship *Includes Table of 12 PLUS Name Scholarship*
 - _____ **\$15,000:** Scholarship Sponsor *Includes Name Scholarship*
 - _____ **\$ 5,000:** Table(s) of 12
 - _____ **\$ 4,500:** Table(s) of 10
 - _____ **\$ 4,800:** Table(s) of 10 plus 2 Scholarship Recipients
 - _____ **\$ 500:** Individual Tickets (civilian)
 - _____ **\$ 150:** Individual Tickets (government)
 - _____ **\$ 150:** Scholarship Recipients

Additional **tax deductible** contribution to NYC Post Scholarship fund \$ _____

Payment

Please make checks payable to **SAME, New York City Post**
 and mail with registration form to:

AECOM
 605 Third Avenue • New York, NY 10158
 attn: **Edward J. Schmeltz, PE**

For additional information please contact Denyse Paul
 E-mail: **denyse.paul@aecom.com**
 Telephone: 212-973-2904 Fax: 212-973-2904

Attendees' list (deadline to submit final attendees' list is October 15, 2009)

Please add additional sheet as needed and e-mail to Ms. Paul at address above.

- | | |
|--|---|
| 1. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. _____ | 10. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. _____ |
| 2. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. _____ | 11. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. _____ |
| 3. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. _____ | 12. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. _____ |
| 4. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. _____ | 13. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. _____ |
| 5. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. _____ | 14. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. _____ |
| 6. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. _____ | 15. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. _____ |
| 7. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. _____ | 16. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. _____ |
| 8. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. _____ | 17. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. _____ |
| 9. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. _____ | 18. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. _____ |