



Table Reservation Form

We are looking forward to being back together again in-person*! We invite your firm/business to recognize your employees for their achievements in the CPA profession by reserving a table at the annual Circle of Excellence awards dinner. This year, tables will seat six people, allowing for additional social distancing. If your group is comfortable, we can increase your table capacity to eight people. Dinner is \$75/person and you may deduct \$75 for every complimentary attendee sitting with you. Please return the completed form to membership@orcpa.org or fax: 503-626-2942 **by April 29, 2022**. For event details, please visit: www.orcpa.org/event/C22001.

Firm/Business Name: _____

Firm/Business Contact (name & email): _____

Attendees' Names	Complimentary Attendee	Attendee
	<ul style="list-style-type: none"> • TES = Top Exam Scorer • TAS = Top Accounting Student • FAC = Faculty • SR = Scholarship Recipient 	<ul style="list-style-type: none"> • CPA = Newly Certified CPA • EC = Exam Candidate • REP = Firm/Bus. Representative • GST = Guest
1.	<input type="checkbox"/> TES <input type="checkbox"/> TAS <input type="checkbox"/> FAC <input type="checkbox"/> SR	<input type="checkbox"/> CPA <input type="checkbox"/> EC <input type="checkbox"/> REP <input type="checkbox"/> GST
2.	<input type="checkbox"/> TES <input type="checkbox"/> TAS <input type="checkbox"/> FAC <input type="checkbox"/> SR	<input type="checkbox"/> CPA <input type="checkbox"/> EC <input type="checkbox"/> REP <input type="checkbox"/> GST
3.	<input type="checkbox"/> TES <input type="checkbox"/> TAS <input type="checkbox"/> FAC <input type="checkbox"/> SR	<input type="checkbox"/> CPA <input type="checkbox"/> EC <input type="checkbox"/> REP <input type="checkbox"/> GST
4.	<input type="checkbox"/> TES <input type="checkbox"/> TAS <input type="checkbox"/> FAC <input type="checkbox"/> SR	<input type="checkbox"/> CPA <input type="checkbox"/> EC <input type="checkbox"/> REP <input type="checkbox"/> GST
5.	<input type="checkbox"/> TES <input type="checkbox"/> TAS <input type="checkbox"/> FAC <input type="checkbox"/> SR	<input type="checkbox"/> CPA <input type="checkbox"/> EC <input type="checkbox"/> REP <input type="checkbox"/> GST
6.	<input type="checkbox"/> TES <input type="checkbox"/> TAS <input type="checkbox"/> FAC <input type="checkbox"/> SR	<input type="checkbox"/> CPA <input type="checkbox"/> EC <input type="checkbox"/> REP <input type="checkbox"/> GST

Table cost:\$ _____

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Table cost:\$ _____

(Optional) Additional guest(s): _____

Payment information:
Total to charge to card: _____

Credit card number: _____ Expiration date: _____

Signature: _____

* All in-person participants agree to follow current health and safety guidelines and must adhere to applicable requirements including the following: 1) Acknowledge the COVID-19 assumption of risk, waiver, and release; and 2) Follow local mask guidelines, if any, in place at the time of this event and comply with any other safety guidelines required by OSCP or the venue.