

University of Florida College of Medicine
OFFICE OF STUDENT AFFAIRS and REGISTRATION
P. O. Box 100216 UFHSC
Gainesville, FL 32610-0216
Class of 2013

Name: _____
(Please Print)

FACULTY DINNER

Please indicate if you would like to attend a faculty dinner. If you are bringing a guest, the name of your guest must be listed below.

- I will attend a dinner in the home of a faculty member on Friday, September 11th
- Sorry, I will be unable to attend a faculty dinner.
 - I will bring my spouse - name _____
 - I will bring a date - name _____
 - I am a vegetarian My guest is a vegetarian
 - I and/or my guest have dietary restriction(s) Please list _____

On the first day of orientation you will receive your official invitation to dinner. The hosts are given the names of students/guests who will attend each dinner. Therefore, it is very important that you reply by the deadline. Please do not ask at the last moment if you can bring a guest.

LUNCHESES

Lunch will be provided during Orientation - Monday, August 10th through Thursday, August 13th. In order to help us plan for these four events, please give your lunch preferences below.

Monday, August 10th - Orientation Lunch

- I would prefer a vegetarian lunch
- I would prefer ham
- I would prefer turkey
- I would prefer roast beef

Tuesday, August 11th

- I would prefer a vegetarian lunch
- I would prefer ham
- I would prefer turkey
- I would prefer roast beef

Wednesday, August 12th

- I would prefer a vegetarian lunch
- I would prefer ham
- I would prefer turkey
- I would prefer roast beef

Thursday, August 13th

- I would prefer a vegetarian lunch
- I would prefer ham
- I would prefer turkey
- I would prefer roast beef

DEADLINE TO RETURN THIS FORM: August 1, 2009

“Welcome To GATOR Country”