



LOBSTER DAY 2009

GET YOUR CLAWS ON



Saturday, May 9, 2009

12:00 - 5:30 p.m. - Centennial Beach
500 West Jackson • Naperville, IL

The Naperville Jaycees are selling live or cooked North Atlantic Lobsters to help raise money for the community.

To order:

1. Fill out the form below.
2. Please make checks payable to the Naperville Jaycees, mail check and form to:
Naperville Jaycees, PO Box 22, Naperville, IL 60566-0022.
3. To pay with Visa or MasterCard, complete the credit card order form, email or fax BOTH forms.
Incomplete forms cannot be processed. Email: jcinfo@naperjaycees.org, Fax: 630.299.4579
4. Pick-up time confirmations will be emailed to you.

Please note that we are emailing confirmations to keeps costs down, so we can focus on helping others in our community.

Questions? Feel free to phone us at 630.961.9375 or visit our website at www.naperjaycees.org for details.

A limited number of Lobster Kits are available. Kits include 2 bibs, 2 lobster picks and 2 butter ramekins.

Plan your Lobster Day Party - contact us for details!

Fresh, Live North Atlantic Lobsters

Average weight 1¼ to 1½ pounds

\$20 each for Live Lobsters or \$25 each Cooked



Naperville Jaycees Lobster Day Order Form

- Orders MUST be received by MAY 4, 2009 -

Email confirmations will be sent after the deadline.

Name _____

Address _____ City _____ State _____ Zip _____

Phone (_____) _____ Email _____

I want _____ Live Lobster(s), \$20 each, for a total of \$ _____

I want _____ Cooked Lobster(s), \$25 each, for a total of \$ _____

I want _____ Lobster Kit(s), \$5 each, for a total of \$ _____

May 9 pick-up time
(please select one):

Cooked: 12:00-2:00 2:00-4:00
(or Live) 4:00-5:30

Naperville Jaycees
P.O. Box 22
Naperville, IL 60566-0022

Phone: 630.961.9375

Fax: 630.299.4579

Email: jcinfo@naperjaycees.org

Website: www.naperjaycees.org

Naperville Jaycees 2009

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PO Box 22, Naperville, IL 60566-0022
Phone 630 961 9375
Fax 630 299 4579
jcinfo@naperjaycees.org
naperjaycees.org



Credit Charge Card Authorization

Date:

Visa or MasterCard (circle one)

Card Holder Name:
(as it appears on card)

Company Name:
(if applicable)

Street Address:

City/State/Zip:

Phone (xxx-xxx-xxxx):
(phone registered to card)

Credit Card Number:

Card Expiration Date:
(month and year)

CVV Security Code:
(3 digits on back of card)

Amount:

Business Code:
(if applicable)

Reason for Charge:

Cardholder Signature:

Form must be completed in its entirety. Visa or MasterCard only.