



INDIAN VALLEY CHAMBER OF COMMERCE
P.O. BOX 64077
SOUDERTON, PA 18964
(215) 723-9472

LEGISLATIVE FORUM SERIES
FRIDAY, FEBRUARY 19, 2010
FRIDAY, MARCH 19, 2010

at
FRANCONIA HERITAGE BANQUET & CONFERENCE CENTER

The Legislative Affairs Committee is sponsoring a “**Legislative Forum Series**” that will feature our **State Representatives, Friday, February 19, and our State Senators, Friday, March 19.** The Breakfast Meetings will be held at **Franconia Heritage Banquet & Conference Center, 508 Harleysville Pike, Franconia, PA., 7:30 a.m. – 9 a.m.**

The Legislators will be bringing us up to date on what is happening in their committees, as well as bring information on issues of timely importance to business. This is also an opportunity to meet our legislators.

FRIDAY, FEBRUARY 19

invited

**REPRESENTATIVES ROBERT GODSHALL, PAUL CLYMER,
KATHARINE WATSON and MATTHEW BRADFORD**

FRIDAY, MARCH 19

invited

SENATORS ROBERT MENSCH, STEWART GREENLEAF AND CHARLES MCILHINNEY

The cost is \$18 for Chamber members per meeting, \$25 for non-members per meeting. Breakfast is included. Reservations may be made by returning the attached coupon, calling or FAXing the Chamber office. Phone: (215) 723-9472, FAX: (215) 723-2490. E-mail address: ivchamber@indianvalleychamber.com or register on line at www.indianvalleychamber.com

Please note: Cancellation notice must be given 24 hours prior to the meeting for refunds or credits.

Enclosed please find a check in the amount of \$ _____ for _____ reservations for the “**Legislative Forum Series**” 7:30 a.m. – 9:00 a.m. at Franconia Heritage Banquet & Conference Center, Franconia. \$18 per person Chamber members per meeting, \$25 per person non-members per meeting. Breakfast included.

February 19 – State Representatives

NAME(S) _____

COMPANY _____

PHONE _____ EMAIL _____

March 19 – State Senators

NAME(S) _____

COMPANY _____

PHONE _____ EMAIL _____

Method of Payment

_____ Check enclosed (payable to Indian Valley Chamber of Commerce)

_____ Credit Card payment _____ Mastercard _____ Visa

(Card Number) _____ CVC Code _____

Signature _____ Exp. Date _____