

## 2023 Annual Awards Banquet Reservation

Please return this form along with your payment by April 13 to:

Illinois State Historical Society  
PO Box 1800  
Springfield IL 62705-1800

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Names of members attending at \$50 each: \_\_\_\_\_

\_\_\_\_\_

Names of non-members attending at \$60 each: \_\_\_\_\_

\_\_\_\_\_

If paying by credit card, give name on card and address if different than above

Name on Card: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Credit card number: \_\_\_\_\_

CVV Number: \_\_\_\_\_

Expiration date: \_\_\_\_\_