

**The Maryland Centenarians Committee, Inc.** cordially invites all Maryland citizens 100 years of age and older, and persons who will be

age 100 by December 31, 2024, to attend the 31st Annual Maryland Centenarians Recognition Luncheon on Thursday, May 9, 2024 from

11:30 a.m. - 2:30 p.m.

**Martin’s West, 6821 Dogwood Road, Baltimore, Maryland 21244**

To make a reservation(s) for the luncheon, please complete the Luncheon Reservation Form and Questionnaire at the bottom of this page and return it, along with your payment, to the address listed on the form.

**Reservation Deadline: Registration forms MUST be**

**received by the Committee no later than April 15, 2024**

Cost: $55.00 per Person

**NO REFUNDS**!

***There is no cost for the Centenarians.***

Luncheon tickets and reservation confirmations will be mailed after April 15, 2024.

### Certificate of recognition

Centenarians who are unable to attend the luncheon, but would like to

receive a Certificate of Recognition, should complete this form, and return it to the address listed below by **April 1, 2024.**

Unfortunately, no additional certificates will be produced and mailed after the celebration.

For further information, please call **410-664-0911**

or visit **www.mdcentenarians.org**



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# Annual Maryland Centenarians Recognition Luncheon

Thursday, May 9, 2024

**Luncheon Reservation Form**

\_\_\_\_\_I will not be able to attend. \_\_\_\_\_I would like to receive a Certificate.

###### **Please Print or Write Centenarian’s information Legibly**

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

( ) Male ( ) Female

Age:\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

###### Marital Status: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Number of Living Children:\_\_\_\_\_\_\_\_\_\_

###### Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(City) (State) (Zip Code)

###### Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone: ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Questionnaire

To what do you attribute your longevity? (Optional):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What is your fondest memory? (Optional): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

May we submit your name for a possible interview by the media? ( ) Yes ( ) No

*(By signing this registration form below, you are giving the Maryland Centenarians Committee, Inc.*

*permission to use your photo(s) in its promotional and advertising efforts.)*

Do you prefer a vegetarian meal? The cost is the same. ( ) Yes ( ) No

Payment: ($55.00 Per Person) - No Refunds

Enclosed is a check for $\_\_\_\_\_\_\_\_\_\_\_for \_\_\_\_\_\_\_\_\_\_lunches

**(Centenarians – NO CHARGE -- *Please do not include the centenarian(s) in your count or check.)***

Make check payable to: **Maryland Centenarians Committee, Inc.**

Mail to: Maryland Centenarians Committee, Inc.

PO Box 7528, Baltimore, Maryland 21207

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While the Federal regulations/precautions for the Coronavirus (COVID-19) have been/are being minimized across the country, we still strongly suggest that you take the precautions you feel are necessary to ensure your safety and comfort level as we move toward this phase of COVID-19. The Maryland Centenarians Committee, Inc. will do everything we can to ensure the safety of everyone (as we have done over the last 28 years) and have put into place preventative measures to ensure a healthy, safe, and wonderful celebration of our Centenarians.

In attending the Maryland Centenarians Recognition Luncheon at Martin’s West, you hereby acknowledge and agree to the following:

1. I have full knowledge of all possible risks to me, including but not limited to health risks that may occur during or because of my participation in the luncheon.
2. I hereby knowingly, freely and voluntarily waive for all time any right of cause of action of any kind arising during or as a result of my attendance at the luncheon which may or could accrue to the Committee, it’s officers, or volunteers, including but not limited to injury or damage occasioned by negligent or willful acts or omissions of the Committee or persons supplying services or materials in connection with the luncheon.

By signing below, I hereby release The Committee and its volunteers from all claims for liability for illnesses, damages or injuries which may be sustained while at the luncheon.

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

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

Mobile Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_