



Phone 214.526.0007

Email: info@thedallasknifeandforkclub.com

MyDKFClub.com

includes reservations & payment

# The DALLAS KNIFE & FORK CLUB INC.

25 HIGHLAND PARK VILLAGE · SUITE 100 · 555 · DALLAS, TEXAS 75205-2785

Name \_\_\_\_\_

Address \_\_\_\_\_

City and Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

**SHEREE J. WILSON**

**Wednesday, March 12, 2025**

**Northwood Country Club**

**Social Hour - 6:15 p.m. Dinner - 7:00 p.m.**

**Seating priority based on date your reservation is received**

**Reservations:**

Member Dinners \_\_\_\_\_ at \$120.00 each ..... \$ \_\_\_\_\_

Guest Dinners \_\_\_\_\_ at \$120.00 each ..... \$ \_\_\_\_\_

Enclosed Check for Total Amount of ..... \$ \_\_\_\_\_

\_\_\_\_\_ Please seat me (us) at a “no host” table.

\_\_\_\_\_ Checks are enclosed for the following table reservation.  
Please list your own name. 8 guests per table.

**Optional Dinners**

Beef Fish Veg.

1. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please return this form completed and your check(s) made payable to:

The Dallas Knife and Fork Club, Inc.

My Special Dietary Requests \_\_\_\_\_