



MFASD

METAL FINISHING ASSOCIATION
OF SAN DIEGO, INC.



MFASC

METAL FINISHING ASSOCIATION
OF SOUTHERN CALIFORNIA, INC.



MFANC

METAL FINISHING ASSOCIATION
OF NORTHERN CALIFORNIA, INC.

2010 MFASD, MFASC & MFANC FALL OUTING

Hosted by ***MFASD***

Catamaran Resort Hotel & Spa

San Diego, CA

October 22 - 24, 2010

(www.catamaranresort.com)

**Register ASAP, and assure your spot.
Please register by September 20, 2010!**

REGISTRATION INFORMATION

Price:

\$600 per couple 2 nights (Fri-Sat)

Price Includes:

- 2 Nights Lodging at the Catamaran Resort Hotel & Spa
- Friday Evening Cocktail Reception
- Saturday Reception & Awards Dinner at the Catamaran Resort Hotel & Spa
- MFASD/MFANC/MFASC Board/Management Meeting - Friday Afternoon

Optional Activities:

- Golf at La Costa Resort & Spa (Saturday)
- Shopping in La Jolla
- Sea World
- Kayaking
- Bike Riding
- Deep Sea Fishing
- San Diego Zoo
- Legoland
- Old Town San Diego
- Much, much more!

DEADLINE: September 20, 2010

HOTEL ROOMS WILL BE RELEASED September 20, 2010.

Call MFASD, MFASC or MFANC Headquarters 1(877) 238-9490 or fax your registration form to 1(818) 238-9592.



MFASD

METAL FINISHING ASSOCIATION
OF SAN DIEGO, INC.



MFASC

METAL FINISHING ASSOCIATION
OF SOUTHERN CALIFORNIA, INC.



MFANC

METAL FINISHING ASSOCIATION
OF NORTHERN CALIFORNIA, INC.

Catamaran Resort Hotel & Spa

San Diego, CA

October 22 - 24, 2010

AGENDA

Friday, October 22	Check-in	3:00 P.M.
	Board/Management Meeting & Update	4:00 P.M. - 5:30 P.M.
	Cocktail & Welcome Reception	6:30 P.M.
	Dinner on your own	8:00 P.M.
Saturday, October 23	Golf	8:00 A.M - 2:00 P.M.
	Optional Activities	9:30 A.M. – 5:30 P.M.
	Dinner & Awards	6:30 P.M.
Sunday, October 24	On Your Own	
	Check-out	12:00 P.M.

MFASD FALL OUTING REGISTRATION

October 22 - 24, 2010

Catamaran Resort Hotel & Spa - San Diego, CA

Please reserve:

_____ **\$600 per couple** 2 nights (Fri-Sat)

NAMES:

COMPANY:

Address: _____

City, State, & Zip: _____

Telephone: _____

I (we) are interested in playing golf. Number of people for golf at La Costa Resort & Spa - \$110 per person _____

Enclosed is my check or credit card payment for \$_____ for my reservation.

Payment by: Check Credit Card (please fill out info below)

Credit Card Type: MasterCard Visa American Express Diner's Club Discover

Credit Card #: _____ Expiration Date: _____ Verification #: _____

Payment Amount: \$ _____ Signature: _____ Date: _____

Name on card: _____ Phone number: _____

Please make check payable to MFASD, P.O. Box 6547, Burbank, CA 91510 and **RETURN YOUR REGISTRATION BY SEPTEMBER 19, 2010. Hotel rooms will be released September 20, 2010.**