



**SENIOR SERVICES DEPARTMENT**

**Mailing Address:**

**6622 Wilson Mills Road, Mayfield Village, OH 44143**

**Phone: 440-919-2332 Fax: 440-919-0207**

**“QUINTEALIA’S TEA ROOM” TRIP**

**DATE:** Wednesday, April 20, 2016

**DEPARTURE:** 10:30 a.m. Our bus will depart from Mayfield Village Civic Center, 6622 Wilson Mills Road.

**LUNCH:** 11:30 a.m. We will enjoy a full afternoon tea including tea sandwiches, petite sweets, freshly baked scones with Devonshire cream and jam and a bottomless pot of tea.

**SHOPPING:** We will browse Quintealia’s gift shop and the glass gift shop next door.

**RETURN:** Approximately 2:30 p.m. We will return to Mayfield Village Civic Center.

**COST:** \$45 includes “A Full Afternoon Tea” and transportation.

**DEADLINE TO REGISTER:** Wednesday, March 9.



**Enjoy the elegant setting while sipping the finest Rishi teas.**

**Enjoy a three-tiered assortment of tea sandwiches, petite sweets, freshly baked scones with Devonshire cream and jam and a bottomless pot of tea.**

**Shop at Quintealia’s and the glass gift shop next door.**

**EASY WAYS TO REGISTER FOR QUINTEALIA’S TRIP:**

**Phone:** 440-919-2332. Call Mayfield Village Senior Services Department with your registration and MasterCard, Visa or DiscoverCard payment.

**Fax:** 440-919-0207. Fax completed registration form to Mayfield Village Senior Services Department with your MasterCard, Visa or DiscoverCard payment.

**In-Person:** You may register in person from 8:30 a.m. until 4:30 p.m. Monday—Friday at the Senior Services Department, 6621 Wilson Mills Road, Mayfield Village. (Entrance to the Department is on the southwest side of the Community Room.)

**Mail:** Mail registration form with your check payable to *Mayfield Village* to MV Senior Services Department, 6622 Wilson Mills Road, Mayfield Village, Ohio, 44143.

The registration form is continued on the reverse side of this flyer.

**REGISTRATION FOR THE "QUINTEALIA'S" TRIP  
WEDNESDAY, APRIL 20, 2016**

**Name(s):** \_\_\_\_\_

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

**City/State/Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Alternate Phone:** \_\_\_\_\_

PAYMENT OPTIONS:

CASH: AMOUNT \$ \_\_\_\_\_ CHECK NO. \_\_\_\_\_ & CHECK AMOUNT \$ \_\_\_\_\_

CHARGE: MasterCard; Visa, Discover AMOUNT CHARGED \$ \_\_\_\_\_

CARD NUMBER \_\_\_\_\_

"V" CODE NUMBER \_\_\_\_\_ (last 3 digits listed above your signature)

EXPIRATION DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_

By my registration, I release and hold harmless Mayfield Village/MV Senior Services Department, its employees, agents, and representatives from any and all claims, costs, damages and liabilities for any injuries sustained by my participation in any program offered by Mayfield Village/MV Senior Services Department. Mayfield Village personnel frequently takes photographs of participants in its programs. By my registration, I grant permission for Mayfield Village to use photographs for publicity purposes.