

Minneapolis District Dental Society

2016 TRAPSHOOT

Wednesday, August 17, 2016

Shooting will take place at 10:00 a.m. until 5:00 p.m. Rain or Shine!

Tee Times available for Duck Tower, Skeet, Sporting Clays, Trap, and Wobble Trap.

All dentists and guests are eligible for trophies which will be awarded during the program following dinner.

Contact the district office at (651) 631-9845 to reserve tee times.

Light lunch served beginning at 12:00 noon.
Wild game dinner to be served at 5:00 p.m.

Adult Dinner Ticket	\$35.00
Child Dinner Ticket	\$16.00 (under 16 years old)
Raffle Tickets for Door Prizes	\$1.00 (sold only at event)
Raffle Ticket for Shotgun	\$10.00 each or 3 for \$20.00 (sold only at event)

(Drawing will be held during the evening program following dinner. You MUST be present to win the shotgun.)

Wild game donations will be gratefully accepted.

Please contact Dr. Michael Gallagher at (952) 942-9600 for details.

Wild Game Menu Entrées Planned

- Hors d'œuvres – Rack of venison, charcuterie: paté decorated with tenderloin served with assorted sausages, chilled salami and gourmet cheeses and crackers, Italian sausage stuffed shiitake mushroom caps, and fresh vegetable tray for starters.
- Dinner menu will begin with hunter's salad. You will then enjoy venison meatloaf, wild boar pot roast, quail, pheasant, grouse, duck, elk chili, goose, bear, moose stroganoff, poached filet of salmon with maple glaze, halibut, and smoked turkey. Served with root vegetables, cowboy potatoes, barbeque baked beans, dinner rolls and butter, and the ever popular beer soaked and barbeque corn on the cob.
- If all that is not enough to fill you up, homemade brownies are on the menu for dessert. What a great day of fun and delicious food all shared with friends and colleagues.

Metro Gun Club, 10601 Naples Street, Blaine, Minnesota



Registration Form - MDDS 2016 Trapshoot, Wednesday, August 17, 2016

Deadline for registration is Friday, August 12, 2016

Payment must accompany dinner reservation. Caterer needs an accurate count for dinner preparations.

Name: (please print) _____ Phone: _____

Address: _____ Zip Code: _____

Number of Reservations: _____ Adult Dinner Ticket(s) \$35.00 each: _____ Child Dinner Ticket(s) \$16.00 each: _____

Payment Method: _____ Check Enclosed _____ MasterCard _____ Visa

Credit Card Number: _____ Expiration Date: _____

Zip Code of Billing Address: _____

Card Member Signature: _____

Please submit your registration and dinner payment to the MDDS, 2475 - 15th Street NW, Suite C, New Brighton, MN 55112.
If paying by credit card, please fax to (651) 631-9846. If you have any questions, please contact the district office at (651) 631-9845.