



# 17<sup>TH</sup> ANNUAL GARY LINCOFF MUSHROOM FORAY SEPT. 16, 2017 • ROSE BARN • NORTH PARK

## FEATURING:

**Mycologist Gary Lincoff**, author of the *Audubon Society Field Guide to North American Mushrooms*. Gary, Past-president of the North American Mycological Association (NAMA), is the nation's best-known mushroom expert. He is a charismatic and entertaining speaker and makes learning about mushrooms fun and interesting. His end-of-the-day table-walk discussions are not to be missed. Also joining us will be **Robert Chang**, Managing Director and Chief Truffle Officer of the American Truffle Company. **Chef George Harris**, who specializes in cooking wild mushrooms and wild game, will do a cooking demonstration and Mushroom Club cooks will prepare a mushroom feast with dozens of unique mushroom dishes to delight your taste buds.

**Rose Barn in Allegheny County North Park, Pearce Mill Road, Allison Park, PA 15101**  
**Saturday, September 16 – Foray includes light lunch & mushroom feast.**

**Indicate the number of persons for each item selected. All fees per person. PLEASE PRINT CLEARLY!**

\_\_\_\_\_ \$35 WPMC member                      \_\_\_\_\_ \$55 Non-members (includes admission & 2017-18 WPMC Membership)  
\_\_\_\_\_ \$15 Students (with ID) & children 11 to 18. Children 10 & under free.

**PLEASE PRINT CLEARLY**

**TOTAL AMOUNT ENCLOSED:** \_\_\_\_\_

Name(s) \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone 1 \_\_\_\_\_ Phone 2 \_\_\_\_\_

E-mail (**PLEASE PRINT CLEARLY**) \_\_\_\_\_

**REGISTER & PAY ONLINE:** [www.wpamushroomclub.org/lincoff-foray/](http://www.wpamushroomclub.org/lincoff-foray/)

**REGISTER & PAY BY CHECK (payable to Western PA Mushroom Club):**

WPMC C/O Barbara DeRiso • 204 Woodcock Dr. • Pittsburgh PA 15215

**FOR MORE INFO:** Barbara DeRiso, Foray Chair: 412-252-2594 / [Lincoff-Foray@wpamushroomclub.org](mailto:Lincoff-Foray@wpamushroomclub.org)

**Registration & Release: signed & dated release form is an absolute requirement for attendance.**

Knowing the risks, I (we) agree to assume the risks, and agree to release, hold harmless, and to indemnify the Western Pennsylvania Mushroom Club, and any of its officers or members, from any and all legal responsibility for injuries or accidents incurred by myself or my family during, or as a result of, any mushroom identification, field trip, excursion, meeting or dining sponsored by the club.

Signature (if participant is under age 18, signature of parent or guardian)

Please print name CLEARLY: (INCLUDE NAMES OF CHILDREN UNDER TEN)

1 \_\_\_\_\_ 1 \_\_\_\_\_

2 \_\_\_\_\_ 2 \_\_\_\_\_

3 \_\_\_\_\_ 3 \_\_\_\_\_

4 \_\_\_\_\_ 4 \_\_\_\_\_

FOR ADDITIONAL NAMES / SIGNATURES, PLEASE INCLUDE AN EXTRA PAGE