



**COSUMNES RIVER COLLEGE
ATHELETIC HALL OF FAME**
DINNER & INDICATION CEREMONY

Please reserve _____ tickets at \$45 each, for a total of \$_____.

List names on back of card.

I cannot attend but would like to contribute \$_____ to the
Cosumnes River College Athletic Hall of Fame.

NAME

ADDRESS

CITY

STATE

ZIP

PHONE (DAY)

(EVE)

EMAIL

PAYMENT OPTIONS:

My check is enclosed for \$_____ (*payable to CRC Athletic Hall of Fame*)

Please bill my credit card: Visa MasterCard

CARD NUMBER

EXPIRATION

CARD HOLDER SIGNATURE

PLEASE RSVP BY OCTOBER 26, 2009

*Please return to: Cosumnes River College
8401 Center Parkway, Sacramento, CA 95823
Attn: Jeanne Calamar*



NAME

NAME

NAME

NAME

NAME

NAME

NAME

NAME

PLEASE RSVP BY OCTOBER 26, 2009

*Please return to: Cosumnes River College
8401 Center Parkway, Sacramento, CA 95823
Attn: Jeanne Calamar*