2009 Cardinal Hall of Fame Awards Presentation Banquet

BISHOP/HIGH
50 Years of Excellence
1959 – 2009

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____ Email: _____

Please reserve _____ seats at $40.00 each. Please respond by October 23rd

Method of Payment

My check # _____ for $ _____ payable to Bishop Garcia Diego High School is enclosed.

Charge my credit card $ _____ for my reservations.

I/We cannot attend. Enclosed is our donation of $ _____ in support of Bishop Garcia Diego High School.

Name: _____

Card Type: Visa _____ MasterCard _____ AmEx _____

Card #: _____ Exp. Date: _____

Signature: _____