

REGISTRATION FORM
CORONADO HIGH SCHOOL
CLASS OF 1975 40 YEAR REUNION
Friday, Nov. 6th and Saturday,
Nov. 7th 2015



Name _____

Maiden name (if applicable) _____

Phone number (in case we need to reach you) _____

E-mail address _____

EARLY REGISTRATION – postmarked on or before to Oct 15th, 2015

of people cost Total

_____ X \$25 \$ _____ For Friday, Nov 6th, 6-?? pm Mexican Fiesta Dinner Buffet Casual attire. The Days Hotel - Tesoro Lounge.

_____ X \$20 \$ _____ For Saturday, Nov 7th, Join us for BBQ Lunch catered by Texas BBQ House. El Dorado Park South Ramada Noon to 4:30 pm. BYOBeer (No Glass)

\$ _____ Total Due

LATE REGISTRATION – postmarked after Oct 15th, 2015

of people cost Total

_____ X \$35 \$ _____ For Friday, Nov 6th, Mexican Fiesta Dinner Buffet Casual attire. The Days Hotel - Tesoro Lounge. 6 to ?? pm

_____ X \$30 \$ _____ For Saturday, Nov 7th, Join us for BBQ Lunch catered by Texas BBQ House. El Dorado Park South Ramada Noon to 4:30 pm. BYOBeer (No Glass)

\$ _____ Total Due

\$ _____ TOTAL DUE: See below for payment information

Making your payment.

Paying by Cashier's Check or Money Order

Make the Check, Cashier's Check or Money Order payable to "CHS Class of '75 Reunion Committee, Inc"

Mail the Registration Form from above where you calculated the Total Due. Make sure you have included the Check, Cashier's Check or Money Order with your registration and mail it to:

CHS Class of '75 Reunion Committee, Inc
c/o Kennedy, Ehrler & Associates, LLC
2211 West Northern Avenue
Phoenix, Arizona 85021

Paying Credit Card or Debit Card

Fill in the requested information on the Credit Card information sheet below. Include the Registration Form where you calculated the Total Due as well as the Credit Card information sheet and please fax to 602-433-1507, or mail to:

CHS Class of '75 Reunion Committee, Inc
c/o Kennedy, Ehrler & Associates, LLC
2211 West Northern Avenue
Phoenix, Arizona 85021

If you do not want to mail or FAX your credit card information, you call us at 602-433-2727 and ask for Lu or Malissa they can take your information.

We still need your registration form FAXED or mailed to us so there is a record of your registration.

Charge will be reported as Kennedy, Ehrler and Associates, LLC. on the statement

CHS Class of '75 Reunion Committee, Inc.

Credit Card Information Sheet

Date:

Total Amount to Process:

Credit Card Number: _____

Credit Card Type: Visa M/C Discover AMEX

Expiration Date: ____/____

CVV2 Code:

Billing Information:

First name:

Last name:

Address:

City:

State:

Zip Code

Email:

Contact Ph #:(optional)

*Charge will be reported as Kennedy, Ehrler and Associates, LLC. on the statement.

Please fax to 602-433-1507, or mail to: Kennedy, Ehrler & Associates, LLC
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Phoenix, Arizona 85021

Or call us at 602-433-2727 and ask for Lu or Malissa