# Sunset High School Class of 1989 Reunion

**Contact Name** _____ **Special Diet/Food Allergies:** _____

**Address** _____

**City** _____ **State** _____ **Zip**_____

**(H) Phone** _____ **ADA Required?** _____

**E-Mail** _____

| Date | Event | Paid Via Paypal? (Y | Quantity | Price | Amount |
|---|---|---|---|---|---|
| | Friday - After June 19, 2009 | | | $ 35 | $ |
| | Saturday Reunion - After June 19, 2009 | | | $ 85 | $ |
| | | | | $ - | $ |
| | | | | $ - | $ |
| | | | | $ - | $ |
| | | | | $ - | $ |
| | | | | $ - | $ |
| | | | | $ - | $ |
| | | | | $ - | $ |
| | | | | $ - | $ |
| | | | | **Processing Fee** | **2.9%** |
| | | | | | |
| | | | | **TOTAL** | **$** |

***Please submit form by US Mail or fax.***
**Make Checks Payable to:**
**Sunset High School Class of 1989**
Mail To: Ooh La La Events
SHS Reunion Committee
P.O. Box 42
Lake Oswego, OR 97034
Fax: 1-800-548-7715

**Questions?**
Phone: 503-267-9602
Email: info@shs89reunion.com

**Charge with PayPal Online - Go to www.shs89reunion.com for details**

**Visa, MasterCard, Discover Subject to 2.9% processing fee**

## Waiver

To the extent permitted by law, Attendee agrees to protect, indemnify, defend and hold harmless Ooh La La Events and the Reunion Committee against all claims, losses or damages to persons or property, government charges or fines, and costs (including reasonable attorney's fees) arising out of or connected to Attendee's event. Attendee agrees to conduct him/herself in an orderly manner in full compliance with applicable laws, regulations, and rules of policies of the event location. Attendee assumes full responsibility for his/her conduct at the event and for any damage he/she causes to any part of the premises during the time of the event.

I/We understand and agree to the above terms and conditions:

_____ _____

Reunion Attendee Signature Reunion Attendee Signature

**Official Use**

Account Rep Kristi South

Payment Received _____ Customer # _____

Authorization _____ Date _____