

## MABLEAN EPHRIAM FOUNDATION

### HONORING UNSUNG FATHERS AWARDS & SCHOLARSHIP BRUNCH 2009

#### TICKET RESERVATION FORM



NAME (Last) \_\_\_\_\_ (First) \_\_\_\_\_ Title \_\_\_\_\_  
Company \_\_\_\_\_ Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-Mail \_\_\_\_\_

Please reserve tickets for me as follows:

# \_\_\_\_\_ Adults/Teens (ages 14 and over) @ \$75 each

# \_\_\_\_\_ Children (ages 6 to 13 years) @ \$45 each

# \_\_\_\_\_ Children (ages 5 and under) \$10 each

TOTAL # Tickets \_\_\_\_\_ TOTAL PAYMENT ENCLOSED \$ \_\_\_\_\_

MAKE ALL CHECKS/MONEY ORDERS PAYABLE TO AND MAIL TO;

#### **MABLEAN EPHRIAM FOUNDATION**

Post Office Box 39A60  
Los Angeles, California 90039

or Fax to: 323 664-5325

IF PAYING BY CREDIT CARD, PLEASE INDICATE;

NAME (as it appears on credit card) \_\_\_\_\_

Address (associated with credit card) \_\_\_\_\_

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

Phone No. (associated with credit card) \_\_\_\_\_

Type of Credit Card: \_\_\_\_\_ Am/Ex \_\_\_\_\_ Visa \_\_\_\_\_ Mastercard

Credit Card No. \_\_\_\_\_ Exp.Date \_\_\_\_\_ Security Code \_\_\_\_\_

Signature authorizing charge to your account: \_\_\_\_\_

ALL SALES ARE FINAL AND WILL NOT BE REFUNDED IF UNABLE TO ATTEND, A FEE WILL BE CHARGED OF \$25 ON ALL RETURNED CHECKS AND UNAPPROVED CREDIT CARD CHARGES IN ADDITION TO TICKET PRICE)

PLEASE INDICATE THE NAMES AND AGES OF ALL PERSONS FOR WHOM THIS RESERVATION IS MADE. PRINT CLEARLY. USE A SEPARATE SHEET OF PAPER, IF NECESSARY

RESERVATION DEADLINE IS JUNE 17, 2009. ALL funds must be received by this date. **NO EXCEPTIONS.**

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