RSVP by Friday, September 28, 2007.
Please enclose your reply in an envelope and send to:

Make-A-Wish Foundation® of Oregon
2000 SW 1st Avenue, Suite 100
Portland, OR 97201

MAKE-A-WISH®

www.orwish.org (503) 292-2280

Name(s): _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

Supporter ticket: $100* per person x _____ seats

Table of 10: $1000*

Patron ticket: $250* per person x _____ seats
Patron ticket includes invitation to exclusive champagne patron party, patron gift and valet parking.

☐ I am unable to attend, but would like to make a gift. ☐ I would like to sponsor a Wish Child's attendance for $100.

Total payment enclosed: $ _____

Method of Payment:

☐ Check enclosed ☐ Visa® ☐ MasterCard® ☐ American Express®

Credit Card No. ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Expiration _____/_____ Signature _____

*Fair market value: $45/person

Federal Tax ID Number: 82-0385049