



OFFICIAL 2018 REGISTRATION FORM

Register by April 1 to enter an early bird drawing for a HOWA 1500 Heavy Barreled Action in 6.5 Creedmoor

REGISTRATION CONTACT

Name: _____ Dinner Selection:
 Steak Salmon

Guest name: _____ Steak Salmon
Please provide names for each guest. List additional guests on the next page.

Address: _____ City, State, Zip: _____

Email: _____ Phone: _____

REGISTRATION OPTIONS

Packages:

- Package #1 - \$300 (\$375 value)** Qty _____ = \$ _____
6 Premium Raffle Tickets, 10 strips (50) Bucket Raffle Tickets and ONE dinner registration
- Package #2 - \$450 (\$600 value, up to \$1,029 if drawing winner)** Qty _____ = \$ _____
9 Premium Raffle Tickets, 15 strips (75) Bucket Raffle Tickets, TWO dinner registrations, PLUS entry into exclusive Weatherby drawing
- Package #3 - \$1,200 (\$1,600 value)** Qty _____ = \$ _____
Reserved table with dinners for 10 guests, 12 premium Raffle Tickets and 30 strips (150) Bucket Raffle Tickets

Dinner Registrations

- Individual Dinner - \$75 per person Qty _____ x \$75 = \$ _____
- Youth Dinner (16 years of age and under) \$65 per person Qty _____ x \$65 = \$ _____
- Table for 10 guests (please list names on next page) Qty _____ x \$800 = \$ _____
- Sponsor a Marine (Support the attending Honor Guard with a donation of \$50 or more) \$ _____
- Corporate Sponsor Table \$2,500 = \$ _____
Reserved VIP table with special dinner service, logo recognition as event sponsor and more

Raffle Tickets

- Bucket Raffle Tickets Strip of 5 for \$20 - Qty _____ x \$20 = \$ _____
- Premium Raffle Tickets 1 for \$20 - Qty _____ x \$20 = \$ _____
Fausti Double Shotgun in 12 ga. 1 of only 200 made 3 for \$50 - Qty _____ x \$50 = \$ _____
Kimber 8400 Subalpine in 300 win mag with Zeiss Conquest Scope

PAYMENT INFO

TOTAL FROM ABOVE = \$ _____

- Visa / MasterCard **OR** Check enclosed (payable to SCI Lewis and Clark)

Name on card: _____ Billing zip code: _____

Card number _____ Exp: _____ 3-digit code: _____

Return to: 6745 SW Hampton, Suite 101, Portland, OR 97223
Email - lewisandclarksci@gmail.com ■ fax - 503.597.3668



TABLE GUEST REGISTRATION

Please list name and individual contact information for EACH guest attending the event. All bidders must be registered.

1 - Name: _____ Steak Salmon

Address: _____

Email: _____ Phone: _____

2 - Name: _____ Steak Salmon

Address: _____

Email: _____ Phone: _____

3 - Name: _____ Steak Salmon

Address: _____

Email: _____ Phone: _____

4 - Name: _____ Steak Salmon

Address: _____

Email: _____ Phone: _____

5 - Name: _____ Steak Salmon

Address: _____

Email: _____ Phone: _____

6 - Name: _____ Steak Salmon

Address: _____

Email: _____ Phone: _____

7 - Name: _____ Steak Salmon

Address: _____

Email: _____ Phone: _____

8 - Name: _____ Steak Salmon

Address: _____

Email: _____ Phone: _____

9 - Name: _____ Steak Salmon

Address: _____

Email: _____ Phone: _____

10 - Name: _____ Steak Salmon

Address: _____

Email: _____ Phone: _____