

CREATE A LASTING MEMORY

With a Seat Dedication in the PAC

ORDER FORM

Easy as 1, 2, 3! with this mail in or direct ordering online!

Seat Dedication Tab at www.reach4pylusd.org

STEP #1: Choose your seat!

Helpful Hint: By following the link for online ordering, you can see what seats are still available!

<p>*Seat Location Selection: <input type="checkbox"/> Front Row <input type="checkbox"/> Orchestra <input type="checkbox"/> Mezzanine <input type="checkbox"/> House Right <input type="checkbox"/> House Left <input type="checkbox"/> Contact me to discuss</p>	<p>Important dedication & seat plate information: <i>A separate seat dedication order form must accompany EACH plate inscription.</i></p>
<p>Select seat location choice: Front Row - \$1,000, Orchestra - \$500, Mezzanine Center - \$300 or House Right or Left - \$150</p> <p>Check the box of your title inscription choice below (This will be the first row of your plate). Clearly print exact inscription wording (including capitalization & lower case letters) for rows 2 & 3. Spaces & punctuations count as a character. Double check for accuracy (max 20 characters per row) Be sure to photocopy each completed form as record(s) of your transaction(s).</p> <p>PLEASE NOTE: Actual seat location is assigned on a first come basis.</p> <p><i>*Best seat location is made on your behalf when using this form, however if you wish to select your own specific seat location from the available inventory, please use our online ordering process.</i></p>	

STEP #2: Choose your engraving!

Helpful Hints: You must check one the four title inscriptions, i.e. "In Memory of," or "Celebrating." This will be the first row of your engraving.

<input type="checkbox"/> In Memory of	<input type="checkbox"/> Celebrating	<input type="checkbox"/> In Honor of	<input type="checkbox"/> Alumni																
Row 1	<i>Select from one of the choices above for this row on seat plate</i>																		
Row 2																			
Row 3																			

STEP#3: Fill out your payment information!

Mailing Address (if paying by credit card, please provide billing address):		Company (if applicable):	
Donor Name:			
Email Address:		Phone #:	
Mastercard or Visa Card #		Expiration Date:	CSV#:
Name on card if different than above			
<input type="checkbox"/> Please check this box if you prefer to have someone contact you via phone for credit card information			



Mail completed form with enclosed check made to
R.E.A.C.H. Foundation or credit card information to:
R.E.A.C.H. Foundation, 21520 Yorba Linda Blvd. Suite G503, Yorba Linda, CA 92887

Questions?

Please contact the R.E.A.C.H. Foundation via email to:
info@reach4pylusd.org

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