



**LUNCHEON  
REGISTRATION**

**FORM**

**August 15, 2019**

**11:30—12:30**

Name: \_\_\_\_\_

Title: \_\_\_\_\_ Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Registration Fees:**

\$10 Regular Registration

(Includes Lunch)

**Method of Payment:**

Check / Money Order

Please make checks payable to:

**Oasis A Safe Haven**

P.O. Box 276

Lake Charles, La 70602

Credit Card

(Please call **436-4552** to process)

**Presented by:**

