

*Centennial High School Class of 1979
Order Form*

Name: _____
Address: _____
City, State, Zip: _____
Phone: _____

	<u>Quantity</u>	<u>Price</u>	<u>Total</u>
<i>30 Year Weekend DVD</i>	_____	\$5	\$ _____
<i>Memories DVD</i>	_____	5	_____
<i>Directory CD</i>	_____	5	_____
<i>Total</i>			\$ _____

Make checks payable to: Centennial Class of 1979 Reunion
Send checks to: Carolyn Griffin
P. O. Box 707
Champaign, IL 61824-0707