

RCAF 2010

Name _____

Address _____

City _____ State _____ Zip _____

Email _____ Phone # _____

2010 RCAF Investment Amount \$ _____ (Please make checks payable to: RCAF)

Please circle applicable method of payment CASH CHECK VISA MASTERCARD DISCOVER AMEX OTHER

Account Number _____ Exp. Date _____

Credit Card payments may also be made at www.RCAF4UL.com or by visiting the RCAF Office.

Signature _____ Date _____



**RAGIN' CAJUNS[®]
ATHLETIC FOUNDATION**

Cox Communications Center
201 Reinhardt Drive
Lafayette, LA 70506
Phone (337) 482-5393
Toll Free (877) RCAF-4-UL
Fax (337) 482-1041
info@RCAF4UL.com
www.RCAF4UL.com