



Hamilton

2010 Commencement Weekend DVD Order

Name of Graduate _____

DVD quantity: ____ x \$20 = \$_____

Payment method:

My check, payable to "Trustees of Hamilton College,"
is enclosed.

Charge my VISA/MC/AMEX:

Name as it appears on card _____

Billing Address _____

City _____ State ____ Zip _____

Account # _____

Expiration Date _____

Signature _____

Daytime Phone _____

E-mail _____

Complete and return this card to:

Office of the President

198 College Hill Road

Clinton, NY 13323

Allow 10 weeks for delivery of DVDs.

Send DVD(s) to:

Name _____

Address _____
