Tribute to John Denver
One-Day Only Private Concert Starring William Florian
with Included Lunch at Pomona Valley Mining Co.
Friday, July 10, 2020

William Florian takes the stage for this upbeat musical tribute to one of the most beloved singers and songwriters of our time, John Denver. Former member of the American folk music group, The New Christy Minstrels, William saw John Denver as a mentor. He will weave together stories, anecdotes and humor as we honor the life and achievements of John Denver and his music.

Sing along with Florian as he performs Denver’s most celebrated songs such as “Take Me Home Country Roads,” “Sunshine on My Shoulders,” and many more. This one-day only concert is at the Pomona Valley Mining Company, a restaurant set in the tradition of the ol’ mining days with panoramic views. Enjoy an included three-course lunch with choice of entrée. We’ll also visit Cal Poly Pomona’s campus Farm Store with the opportunity to purchase fresh produce and other unique items.

Oasis Member: $109 if paid by check ($113 if paid by credit card)

Departure Time: Please check one: (Approximate return 5:00 pm)

- 8:30 am – Ken Edwards Center, 1527 4th Street, Santa Monica
- 9:15 am – Oasis Baldwin Hills: 4005 Crenshaw Blvd. (MACY’s parking lot)

Mail reservation form to:

WISE & Healthy Aging
1527 4th St., 2nd Floor, Santa Monica, CA 90401
(310) 394-9871, ext. 448
Attention: Barbara Herr (Oasis members can also give form to Glenda, Heidi, Caroline or Danielle)

Oasis Member: $109 if paid by check / $113 if paid by credit card.
Non-Oasis Member: $115 if paid by check / $119 if paid by credit card.

Enclosed is full payment in the amount of $___________ to secure reservations for _____ person(s).

Credit Card # ____________________________ Exp. Date (Mon/Year) ________ Security Digits ________
Amount to be charged $__________ Signature ____________________________ Today’s Date __________

If paying by credit card, this form can be securely faxed to (310) 394-7152

Your Last Name (print) ____________________________________________ First __________________________________________
Name(s) of others covered by this payment: ________________________________________________________________
Your Address __________________________________________ City __________________ State ______ Zip Code _________
Phone ( ) ___________________ Cell ( ) ___________________ (Cell phone called only if emergency on day of trip)
Emergency Contact: Name __________________________ Phone ( ) _______________ Relationship __________

NOTE: Payment in full is required to reserve space. Refunds (minus a $15 processing fee per traveler) for cancellations will only be given prior to the cancellation deadline date which is Friday, June 5, 2020. After the cancellation deadline, refunds (minus the same processing fee) will only be given if the space can be resold. You may send someone in your place with 48-hour notice of permission from WISE & Healthy Aging.