

# CLASS OF '55 60TH REUNION REGISTRATION - APRIL 29 - MAY 1, 2015

DEADLINES: HOTEL RESERVATION: MARCH 17 - REUNION REGISTRATION: APRIL 7

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

Address: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

## REUNION NAMETAGS

Please include the relationship\* of each guest and Class Years for all former students of A&M.

\* spouse, child, friend, sibling, parent, etc...

Classmate Nametag: \_\_\_\_\_ Spouse Nametag: \_\_\_\_\_

Guest 1 Nametag: \_\_\_\_\_ Guest 2 Nametag: \_\_\_\_\_

Relationship: \_\_\_\_\_ Relationship: \_\_\_\_\_

REUNION REGISTRATION & ACTIVITIES						TOTAL
Registration for myself <input type="checkbox"/> \$10 - Registration						\$
Registration for Spouse & Guest(s) <input type="checkbox"/> \$10 - (includes all guests)						\$
Add a \$10 late fee if registering after April 15, 2015 (food cannot be guaranteed 3 days prior to event.)						\$
Indicate the activities each guest will be attending, including yourself, by filling the boxes on the left and your total on the right.						
WHO'S ATTENDING		ACTIVITY	NUMBER ATTENDING			
Classmate	Spouse	Guest 1	Guest 2			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wednesday Dinner - Gratuity Included	_____ x \$30	\$
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thursday Dinner - Gratuity Included	_____ x \$30	\$
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Friday Breakfast - Gratuity Included	_____ x \$20	\$
<b>GRAND TOTAL FOR REGISTRATION &amp; ACTIVITIES \$</b> _____						

Method of Payment: Please ☒ one: ☐ Check (Payable to The Association of Former Students)  
or ☐ Credit Card: Mastercard / Visa / Discover / American Express

Card #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Exp. Date: \_\_\_\_\_ / \_\_\_\_\_ Verification Code\*: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\* The last 3 digits of the number printed on the signature line on the back of your card

If you have any special dietary or physical needs, please let us know: \_\_\_\_\_

Office Use:

Rcd: \_\_\_\_\_

BSR: \_\_\_\_\_

PID: \_\_\_\_\_

Proc: \_\_\_\_\_

Letter: \_\_\_\_\_

Tags: \_\_\_\_\_

Return this form to 505 George Bush Dr., College Station, TX 77840  
or fax to 979-845-9263

ATTN: Class of '55 60th Anniversary Reunion

Register Online at [www.AggieNetwork.com/Reunions](http://www.AggieNetwork.com/Reunions) - it's free and secure!