

# CLASS OF '56 MINI REUNION REGISTRATION - APRIL 27 - 30, 2015

DEADLINES: HOTEL RESERVATION: MARCH 25 - REUNION REGISTRATION: APRIL 13

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)					\$
<b>Add a \$10 late fee if registering after April 13, 2015</b> (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.					
<b>WHO'S ATTENDING</b>		<b>ACTIVITY</b>	<b>NUMBER ATTENDING</b>		
Classmate	Spouse	Guest 1	Guest 2		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Monday Dinner - Gratuity Included _____ x \$30	\$
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tuesday Dinner - Gratuity Included _____ x \$30	\$
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wednesday Dinner - Gratuity Included _____ x \$30	\$
<b>GRAND TOTAL FOR REGISTRATION &amp; ACTIVITIES</b>					<b>\$</b> _____

Method of Payment: Please ☒ one: ☐ Check (Payable to The Association of Former Students) Ck # \_\_\_\_\_  
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: \_\_\_\_\_

Return this form to The Association, P.O. Box 10005, College Station, TX 778402

or fax to 979-845-9263

ATTN: Class of '56 Spring Mini Reunion

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

Office Use:

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

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

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

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

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

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