

# CLASS OF '64 MINI REUNION REGISTRATION - OCTOBER 11 - 15, 2015

DEADLINES: HOTEL RESERVATION: SEPTEMBER 11 - REUNION REGISTRATION: SEPTEMBER 28

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 September 28, 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>	
<input type="checkbox"/> Classmate	<input type="checkbox"/> Spouse	<input type="checkbox"/> Guest 1	<input type="checkbox"/> Guest 2	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		Sunday Reception- Heavy Hors d'oeuvres - Gratuity Included	_____ x \$38	\$
		Monday Dinner - Gratuity Included	_____ x \$38	\$
<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: \_\_\_\_\_

Office Use:
Rcd: _____
BSR: _____
PID: _____
Proc: _____
Letter: _____
Tags: _____

Return this form to The Association, P.O. Box 10005, College Station, TX 77842

or fax to 979-845-9263

ATTN: Class of '64 Fall Mini Reunion

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