

CLASS OF '70 50 YEAR ANNIVERSARY REUNION REGISTRATION - APRIL 20-23, 2020

REUNION REGISTRATION DEADLINE: April 9 - HOTEL REGISTRATION DEADLINE: March 29

tx.ag/1970Reunion50

Primary Registrant: _____ 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 / Guest Nametag: _____

☐ Cap ☐ Visor

☐ Cap ☐ Visor

Guest 2 Nametag: _____ Relationship: _____

Guest 3 Nametag: _____ Relationship: _____

REUNION REGISTRATION & ACTIVITIES				TOTAL
*Registration for myself (Active Membership is giving \$50 or more per year) <input type="checkbox"/> \$50 Active Member Registration <input type="checkbox"/> \$55 Non Active Member Registration				\$
*Registration for Spouse & Guest(s) <input type="checkbox"/> \$50 (one time charge, covers all guests)				\$
*Registration fees help cover expenses that include facility rental, event gratuity, audio/visual equipment needs, transportation and bus charters, Class of '70 Reunion gift & other administrative costs.				
I would like to make a contribution to the Century Club today.				\$
Add a \$20 late fee if registering after April 6.				\$
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				COST/PERSON
Classmate	Spouse	Guest 1	Guest 2	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Monday Class Welcome Dinner \$40 per person \$
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tuesday Flag Raising Ceremony No Charge
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Class Photo (only Classmates will be in the picture) No Charge
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Campus Aggie Muster BBQ \$20 per person \$
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pre-Muster Meal (Deli buffet) \$15 per person \$
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Campus Aggie Muster Ceremony No Charge
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Post-Muster Meal (Soup & Salad bar) \$20 per person \$
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wednesday Breakfast \$25 per person \$
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Golf Tournament at TAMU Campus Course (green fee & Cart) \$45 per person \$
				Handicap: _____ Team Preference: _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8 a.m. Physics Presentation & Tour of Mitchell Building No Charge
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	10:30 a.m. tour of Music Activities Center No Charge
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1:30 p.m. tour of Zachry Engineering Education Complex No Charge
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3:30 p.m. tour of Kyle Field No Charge
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wednesday Class Banquet __ (qty) Salmon __ (qty) Beef Tenderloin \$45 per person \$
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thursday Class Farewell Breakfast & Meeting \$25 per person \$
GRAND TOTAL FOR REGISTRATION & ACTIVITIES				\$

Method of Payment: Please ☒ one: ☐ Check (Payable to The Association of Former Students) or ☐ Credit Card

Check #: _____ Card #: _____ Exp. Date: ____/____/____

Verification Code*: _____ Signature: _____ Date: _____

*Visa/MC/Discover: last 3 digits of the number printed on the signature line on the back of your card

*AMEX: the 4 digit number on the front of your card

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

Register Online at tx.ag/1970Reunion50 or return this form by mail to: PO Box 10005, College Station, TX 77842
 or fax to 979-845-9263 ATTN: Class of '70 Reunion

For questions, contact the Class Programs Team at Class@AggieNetwork.com or (979) 845-7514