SUL ROSS GROUP REUNION REGISTRATION FORM - MARCH 21 - 23, 2016 Reunion Registration <u>Deadline</u> : March 1 - Hotel Reservation <u>Deadline</u> : February 28			
Name:Class:			
Email:		e □Bus.	
□Home □Bus. Preferred Address:			
City:	State:	ZIP:_	
REUNION NAMETAGS			
Please include the relationship* of each guest & Class Years for all A&M former students (*child, friend, sibling, parent, etc)			
Classmate Nametag:	Spouse Nametag:		
Guest 1 Nametag:	Relationship:		
Guest 2 Nametag:Relationship:			
	<u>RATION & ACTIVITIES</u>		<u>TOTAL</u>
_ · · _ · _ · _ ·	0 - Active Member 5 - Non-Active Member		
The registration fee includes transportation, facility rental, hospitality room(s), meal gratuity, audio/visual equipment, postage and other fees that may apply.		equipment,	\$
egistration for Spouse & Guest(s) \$30 (one time charge, covers all guests)		iests)	\$
I would like to begin my Century Club Benefits today at the \$ level. (See Page 6 for levels)		\$	
Add a \$10 late fee if returning after March 1. (On-site Registration will incur the late fee.)		\$	
Indicate the activities each guest will be attending, including yourse WHO'S ATTENDING ACTIVITY	elf, by checking the boxes on the left	and entering your total COST/PERSON	al on the right.
(Please choose one dinner entree for each attendee)			
Monday - Sul Ross Group Reunion Banqı (qty) Stuffed Grilled Salmon (qty) Espresso Rubbed Bistro Stea		\$40 ea	\$
Tuesday - Ladies' Coffee, Oakwood Ballro	oom - Hilton	No Charge	
Tuesday - Men's Business Meeting, Main	Ballroom - Hilton	No Charge	
Tuesday - Sul Ross Group Reunion Lunc	heon, MSC Ballroom	\$20 ea	\$
Tuesday - Kyle Field Tour (includes transp	portation and tour costs)	\$15 ea	\$
Tuesday - Class Dinner, Hilton Sundried Tomato & Mozzarella Stuffed Cl	nicken Breast with Marinara	\$25 ea	\$
Wednesday - Sul Ross Group Reunion Fa	arewell Breakfast, Hilton	\$20 ea	\$
GRAND TOTAL FOR REGISTRATION & ACTIVITIES \$			
If you have any special dietary needs, please note: If you have any special physical needs, please note: Method of Payment: Please ✓ one: □ Check payable to The Association of Former Students or □ Credit Card: Mastercard / Visa / Discover / American Express Card #: □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □			
Signature			
* The last 3 digits of the number print			Office Use: Rcd:
Return To: The Association of Former Students, PO Box 10005, College Station, TX 77842, Attn: Sul Ross Group Reunion			BSR: PID: Proc:

or Register Online at tx.ag/SulRoss16

Letter: _ Tags: _