

WASP WWII REUNION ACTIVITY REGISTRATION FORM

Listed below are all registration, tour, and meal costs for the reunion. Please enter how many people will be participating in each event and total the amount. Send that amount payable to ARMED FORCES REUNIONS, INC. in the form of check or money order (no credit cards or phone reservations accepted). Your cancelled check will serve as your confirmation. Returned checks will be charged a \$20 fee. All registration forms and payments must be received by mail on or before August 4, 2006. After that date, reservations will be accepted on a space available basis. We suggest you make a copy of this form before mailing. Please do not staple or tape your payment to this form.

Armed Forces Reunions, Inc.
322 Madison Mews
Norfolk, VA 23510
ATTN: WASP WWII

| OFFICE USE ONLY | |
|-----------------|-------------------------|
| Check # _____ | Date Received _____ |
| Inputted _____ | Nametag Completed _____ |

| | Price Per | # of People | Total |
|--|-----------|-------------|-------|
| CUT-OFF DATE IS 8/4/06 | | | |
| <u>REGISTRATION PACKAGE</u> | | | |
| Includes Reception food on Thursday, Class Dinners on Friday, Banquet on Saturday, and various reunion expenses. | | | |
| <i>Please select your entrée choice(s) for the banquet:</i> | | | |
| Roast Prime Rib of Beef | \$142 | | \$ |
| Grilled Salmon w/ Lemon Butter Sauce | \$142 | | \$ |
| <u>OPTIONAL TOURS</u> | | | |
| THURSDAY: CITY TOUR | \$34 | | \$ |
| THURSDAY: PEARSON AIR FIELD | \$28 | | \$ |
| FRIDAY: EVERGREEN AVIATION MUSEUM | \$46 | | \$ |
| SATURDAY: LUNCH CRUISE | \$39 | | |
| <u>OPTIONAL MEAL</u> | | | |
| SUNDAY: CONTINENTAL BREAKFAST | \$12 | | \$ |
| Total Amount Payable to Armed Forces Reunions, Inc. | | | \$ |

PLEASE PRINT NAME

FIRST _____ LAST _____ NICKNAME _____

CLASS # _____ YEAR 19 _____

SPOUSE NAME (IF ATTENDING) _____

GUEST NAMES _____

STREET ADDRESS _____

CITY, ST, ZIP _____ PH. NUMBER (_____) _____ - _____

DISABILITY/DIETARY RESTRICTIONS _____

(Sleeping room requirements must be conveyed by attendee directly with hotel)

MUST YOU BE LIFTED HYDRAULICALLY ONTO THE BUS WHILE SEATED IN YOUR WHEELCHAIR IN ORDER TO PARTICIPATE IN BUS TRIPS? YES NO (PLEASE NOTE THAT WE CANNOT GUARANTEE AVAILABILITY).

EMERGENCY CONTACT _____ PH. NUMBER (_____) _____ - _____

ARRIVAL DATE _____ DEPARTURE DATE _____

ARE YOU STAYING AT THE HOTEL? YES NO ARE YOU FLYING? DRIVING? RV?

For refunds and cancellations please refer to our policies outlined at the bottom of the reunion program. **CANCELLATIONS WILL ONLY BE TAKEN MONDAY-FRIDAY 9:00am-5:00pm EASTERN TIME (excluding holidays).** Call (757) 625-6401 or email cancel@afri.com to cancel reunion activities and obtain a cancellation code. Refunds processed 4-6 weeks after reunion. to cancel reunion activities and obtain your cancellation code.