

REUNION REGISTRATION FORM

Reunion June 19 & 20, 2015

Classes of 1960-1969

Name: _____

First

Last

(Women Maiden Name)

Address: _____

Phone Number: _____ **E-Mail Address:** _____

I am a member of the MHHS Class of _____

____ I will be attending the reunion. The number in my party will be _____ Names (for name tags): _____

Sirloin steak and tilapia fish will be served at the Saturday night dinner. One steak or fish dinner per guest. I (we) would like to order _____steak(s) _____fish dinner(s).

____ Enclosed you will find my check payable to the MHHS Class of _____ (YOUR CLASS) in the amount of \$ _____ (**\$25.00 per person which covers expense of entire reunion**)

____ I (we) plan to play Best Ball golf on Saturday and the number of players in my party will be _____. (Singles will be matched up) **Note: Golf fees are extra and will be paid to golf course prior to golfing.**

Group photos will be taken at the Saturday night Elks Club Gathering . No professional photos will be available so bring your camera.

____ **I DO NOT PLAN TO ATTEND THE REUNION but am returning this form so you have my contact information for future reunions.**

PLEASE PRINT & RETURN THIS FORM WITH YOUR CHECK NO LATER THAN MAY 1, 2015 TO YOUR CLASS REPRESENTATIVE