

# HHS 55TH CLASS REUNION REGISTRATION

(Please print or type)

Reunion Class Member's Name

\_\_\_\_\_

(Last)                      (First)                      (MI)

Address \_\_\_\_\_

Daytime Phone (    ) \_\_\_\_\_ E-mail Address \_\_\_\_\_

NAME TAG Information (for your name)

\_\_\_\_\_

Classmate's Name (for Name Tag)

\_\_\_\_\_

(Spouse/ Significant other/ Guest)

EVENT REGISTRATION (per person)

Early (Before Aug. 1st) = \$50.00 Late (After Aug. 1st) = \$75.00

Trolley Tour (\$30.00@):\$ \_\_\_\_\_

Scholarship donation: \$ \_\_\_\_\_

TOTAL: \$ \_\_\_\_\_

Make check payable to: Hickman, Class of 1960

Enclose this panel with check & Mail to:

Sylvia Roberts Bradfield

2455 N. Lakeland Drive

Columbia, MO 65202-8979