

REUNION REGISTRATION FORM

**Form &
Fees Due By
July 7, 2009**

_____ (_____) _____
Contact person name **Contact phone number**

List family attending with you (Please Print)

T-SHIRTS **Please select the sizes and quantities (Add'l shirts are \$15 each)**

(Black & Silver)
 Adults: S _____ M _____ L _____ XL _____ 2X _____ 3X _____
 Children's S _____ M _____ L _____

WILL YOU BE THERE?

Friday, Aug 7th
 Meet and Greet 7:30pm – 11:00pm Yes _____ How many? _____ No _____

Saturday, Aug 8th 10:00am – 2:00pm
 *Philadelphia Tour Yes _____ How many? _____ No _____
 Shopping (King of Prussia, Premium Outlet) Yes _____ How many? _____ No _____
 * "Please Touch" Museum (children) Yes _____ How many? _____ No _____
 Waterfront/South Street Bazaar Yes _____ How many? _____ No _____

Pool Party Picnic! 4:30pm – 7:30pm Yes _____ How many? _____ No _____

Sunday, Aug 9th
 *Breakfast Buffet 8:00am – 11:00am Yes _____ How many? _____ No _____
 Church Service 10:00am – 11:45am Yes _____ How many? _____ No _____
 Banquet Luncheon 2:00pm – 4:30pm Yes _____ How many? _____ No _____
 Reunion Celebration 5:00pm – 7:00pm Yes _____ How many? _____ No _____

(**Thursday, Aug 6th**) *Atlantic City Yes _____ How many? _____ No _____
 (**Monday, Aug 10th**) *New York City Yes _____ How many? _____ No _____

Transportation provided for all activities outside hotel
 *additional fees apply

REUNION FEES

(checks/money orders payable to: Martin-Griffin Family Reunion)

How Many? Adults (\$60) + Child < 11 (\$50) = Total Enclosed

_____ + _____ = _____

Please list any additional information, comments or special requests, dietary or other, on the reverse side of the form.