

**REUNION 2019 REGISTRATION FORM**

Listed below is the information needed when registering for the 401<sup>st</sup>/834<sup>th</sup> Supply Reunion. Send the amount payable to Glen Spillman in the form of check or money order (no credit cards or phone reservations accepted). Your cancelled check will serve as your confirmation. All registration forms and payments must be received by mail on or before **September 30, 2019**. This does not get the room reserved at the hotel; their direct number is **318-445-9800 and request room for 401<sup>st</sup> EAFB Reunion**. We suggest you make a copy if this forms before mailing.

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**Glen Spillman**  
**6524 Fennwood Dr.**  
**Zachary, LA 70791**  
**C/o : 401<sup>st</sup>/834<sup>th</sup> Supply Reunion**

**OFFICE USE ONLY**

Check# \_\_\_\_\_ Date Received \_\_\_\_\_  
 Input \_\_\_\_\_ Nametag Completed \_\_\_\_\_

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<b>CUT OFF DATE IS September 30, 2019</b> (After September 30, 2019 Reunion price is (\$50.00))	<b>Price Per</b>	<b># of People</b>	<b>Total</b>
<b><u>REUNION 2019 REGISTRATION FEE</u></b> <b>Dates for the Reunion are: Friday October 4, 2019 –Sunday October 6, 2019</b>  Fee pays hospitality room (welcome reception) snacks and drinks and meals listed below. All other meals pay as you go	\$45.00		
<b><u>EVENTS</u></b>			
<b>Friday October 4: - Welcome Reception(included in registration fee )</b>	<b>Included</b>		<b>Included</b>
<b>Saturday October 5 : Lunch (Included in Registration)</b>	<b>Included</b>		<b>Included</b>
<b>Saturday October 5 : Dinner ( Included in Registration)</b>	<b>Included</b>		<b>Included</b>
<b>Hotel room (pay as you stay)</b>	<b>Pay as you stay</b>		<b>Pay as you stay</b>
<b>Meals (pay as you go)</b>	<b>Pay as you go</b>		<b>Pay as you go</b>
<b>Total Amount Payable to Glen Spillman (cash, check or money order only)</b>			

PLEASE PRINT NAME (for nametags) \_\_\_\_\_

SPOUSE NAME \_\_\_\_\_

GUEST NAMES \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY, STATE, POSTAL CODE \_\_\_\_\_ PHONE NUMBER (\_\_\_\_) \_\_\_\_\_

EMERGENCY CONTACT \_\_\_\_\_ PHONE NUMBER (\_\_\_\_) \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

YEARS AT EAFB \_\_\_\_\_

ARRIVAL DATE \_\_\_\_\_ DEPARTURE DATE \_\_\_\_\_

