

8th AFHS ACTIVITY REGISTRATION FORM – SEPTEMBER 27 – OCTOBER 1, 2017

Listed below are all registration, tour, and meal costs for the reunion. Please enter how many people will participate in each event and total the amount. Send that amount payable to ARMED FORCES REUNIONS, INC. in the form of check or money order. Your cancelled check will serve as confirmation. You may also register online and pay by credit card at www.afr-reg.com/8afhs2017 (3.5% will be added to total). All registration forms and payments must be received on or before August 25, 2017. 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. Returned checks will be charged a \$20 fee. Your contact information will be shared only with reunion attendees.

Armed Forces Reunions, Inc.
322 Madison Mews
Norfolk, VA 23510
ATTN: 8th AFHS

OFFICE USE ONLY

Check # _____ Date Received _____
 Inputted _____ Nametag Completed _____

CUT-OFF DATE IS 8/25/17

	Price Per	# of People	Total
REGISTRATION FEE			
Includes meeting expenses and other reunion expenses.	\$40		\$
Reg. Fee for children ages 8-16 attending more than 1 function & staying at hotel	\$25		\$
MEAL PACKAGES			
<i>Package #1 includes 7 meals beginning with breakfast on Thursday</i>	\$232		\$
<i>Package #2 includes 5 meals beginning with breakfast on Friday</i>	\$162		\$
SEPARATELY PRICED MEALS (if not purchasing a package)			
Thursday, 9/28: Dinner Buffet (Braised Beef & Fried Catfish)	\$51		\$
Friday, 9/29: Rendezvous Dinner (Chicken Piccata)	\$40		\$
Saturday, 9/30: Banquet Buffet at the WWII Museum – transportation included. (Beef Tips & Mildly Blackened Redfish)	\$50		\$
TOURS			
Thursday & Friday, 9/28-29: World War II Museum (box lunch included both days)			
WWII Veterans Price	\$66		\$
All Other Attendees Price	\$94		\$
Please choose one of the following two tours:			
Saturday, 9/30: City Tour	\$39		\$
Saturday, 9/30: Plantation Tour	\$77		\$
Total Amount Payable to <u>Armed Forces Reunions, Inc.</u>			\$

Please Print. If a WWII Veteran is registering on this form, please list his name first.

MEMBER NAME (for nametag) _____ VETERAN NEXT GEN OTHER

IF A VETERAN, PLEASE CIRCLE: WWII Cold War Era Korea Vietnam Gulf War Desert Storm Iraq Other _____

WWII GROUP AFFILIATION FOR UNIT TOTALS & SEATING ARRANGEMENTS (please list BG, not BS) _____

SPOUSE NAME (if attending) _____

GUEST NAMES _____ NEXT GEN

PHONE # (____) _____ - _____ EMAIL ADDRESS _____ @ _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

DISABILITY/DIETARY RESTRICTIONS _____

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).

PLEASE MAKE YOUR HOTEL RESERVATION BEFORE SUBMITTING THIS FORM. WHERE IS YOUR HOTEL RESERVATION CONFIRMED? HILTON AIRPORT 8AFHS OFFICIAL OVERFLOW HOTEL OTHER

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

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