

SOCIETY OF THE FIFTH DIVISION/STEEL TIGERS ACTIVITY REGISTRATION FORM

Listed below are all registration, tour, and meal costs for the reunion. Please enter how many people will be participating 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 your confirmation. Returned checks will be charged a \$20 fee. You may also register online and pay by credit card at www.armedforcesreunions.com/5inf. All registration forms and payments must be received on or before July 25, 2008. After that date, reservations will be accepted on a space available basis. All new registrations accepted at the reunion will be charged a \$10 onsite processing fee. We suggest you make a copy of this form before mailing. Please do not staple or tape your payment to this form.

Armed Forces Reunions, Inc.
322 Madison Mews
Norfolk, VA 23510
ATTN: FIFTH DIVISION/STEEL TIGERS

OFFICE USE ONLY	
Check # _____	Date Received _____
Inputted _____	Nametag Completed _____

CUT-OFF DATE IS 07/25/08

	Price Per	# of People	Total
TOURS			
FRIDAY: MEMORIALS TOUR & MEMORIAL SERVICE	\$ 25		\$
FRIDAY: CAPITOL STEPS SHOW	\$ 62		\$
SATURDAY: MOUNT VERNON LADIES TOUR	\$ 48		\$
SUNDAY: UDVAR-HAZY CENTER TOUR	\$ 32		\$
MEALS			
SATURDAY: BANQUET <i>(Please select your entrée)</i>			
LONDON BROIL	\$ 35		\$
CHICKEN ALFREDO	\$ 35		\$
SUNDAY: BANQUET <i>(Please select your entrée)</i>			
ROAST TURKEY	\$ 35		\$
PORK LOIN MEDALLIONS	\$ 35		\$
OPTIONAL CONTRIBUTION FOR HOSPITALITY ROOM			\$
<u>REGISTRATION FEE - EACH PERSON MUST BE REGISTERED</u>			
Includes Hospitality Room and administrative expenses.	\$ 20		\$
Total Amount Payable to <u>Armed Forces Reunions, Inc.</u>			\$

PLEASE PRINT NAME

FIRST _____ LAST _____ NICKNAME _____

MILITARY UNIT: _____ CONFLICT: WWII VIETNAM PANAMA OTHER _____

SPOUSE/GUEST NAME(S) _____

STREET ADDRESS _____ PH. NUMBER (____) _____

CITY, ST, ZIP _____ EMAIL: _____

DISABILITY/DIETARY RESTRICTIONS _____

(Sleeping room requirements must be conveyed by attendee directly with hotel)

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).

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

ARRIVAL DATE _____ DEPARTURE DATE _____

For refunds and cancellations please refer to our policies outlined at the bottom of the reunion program. **CANCELLATIONS WILL ONLY BE TAKEN MONDAY-FRIDAY 9:00am-5:00pm EASTERN TIME (excluding holidays).** Call (757) 625-6401 to cancel reunion activities and obtain a cancellation code. Refunds processed 4-6 weeks after reunion.