WFHS Class of 1993 15 Year Reunion Registration

NAME AND CONTACT INFORMATION (Please print as it should appear on your nametag.)

Example: First Beth	Maiden (if WFHS	graduate) Robins	son La	st <u>Burgin</u>
First	Maiden (if WFHS ξ	graduate)	La	st
First	Maiden (if WFHS ç	graduate)	La	st
Address				
City	State	Zip		
E-mail	-11			
E-mail The above information will be used to verify our contact information for you.				
RESERVATION (Please note that	at reservations canno	ot be accepted with	nout payment.)	
Number attending				
Early registration discount unt Registration fee after April 11, Registration deadline is May 10	2008: \$85 per perso			est
Amount enclosed \$				
Please make checks or money o WFHS C/O 1993 Reunion PO Box 386 Rincon, GA 31326	rders payable to WF	HS 1993 Reunion	and mail to:	
A vegetarian meal can be prepared for those requesting it. Please indicate, if any, the number of vegetarian meals requested for this reservation				

For more information or for questions, please contact Beth Robinson Burgin at 706-327-7994 or erb@5mw.org