## **REUNION 2014** Registration

## Class of 1959

**DIRECTIONS:** Please complete both sides and mail this form to Reunion 2014, Office of Alumni Relations, Connecticut College, 270 Mohegan Ave., New London, CT 06320-4196, or fax it to 860-439-2303. Questions? Call **800-888-7549**, ext. 2300, or email **reunion@conncoll.edu**. Please fill in the information below as you would like it to appear on your name tag.

First Name:

Last Name:			Class Year: Class Year (if applicable):	
Partner/Spouse/Guest First Name:				
To receive Reunion updates, please provide a preferred e-mail address for College	e announcements:			
Registration Deadline			Subtotal	
We cannot guarantee reservations for meals and on-camp May 22, 2014 at 4 p.m. Refunds will be made for cancel fee, however, is not refundable.				
REGISTRATION FEE		@ \$35 per form =		
Lodging				
On-campus accommodations include breakfast in Harris I Each class will be housed together in a residence hall:	Refectory. See the program for din	ing hours.		
1959: Wright House				
FRIDAY	# of people =	@ \$45/person/night =		
SATURDAY	# of people =	@ \$45/person/night =		
ROOMING REQUESTS (PLEASE SPECIFY IF YOU HAVE ROOMMATE OR ROOM REQUESTS):				
WHEELCHAIR OR OTHER SPECIAL NEEDS:				
PLEASE NOTE that hotel rooms have been blocked off at the Clarion in New London	on, Conn. if you prefer to stay off campus. To res	erve a room, call 860-442-0631.		
Meals				
Friday Sykes Luncheon				
ALUMNAE	# of people =	No Charge		
GUEST(S)	# of people =	@ \$30/person =		
Friday Evening Lobsterbake				
LOBSTER	# of meals =	@ \$45/person =		
CHICKEN	# of meals =	@ \$45/person =		
VEGETARIAN	# of meals =	@ \$35/person =		
Saturday Picnic with Ben & Jerry's Scoop Bar				
CLASS 0F 1959	# of people =	@ \$15/person =		
Saturday class reception and dinner (Price includes fu	all hour-long reception before di	nner and all beverages)		
CLASS OF 1959				
BEEF	# of meals =	@ \$75/person =		
CHICKEN	# of meals =	@ \$75/person =		
VEGETARIAN	# of meals =	@ \$75/person =		
DIETARY NEEDS (PLEASE SPECIFIY IF YOU HAVE SPECIAL DIETARY NEEDS OR ALI	LERGIES):			
GRAND TOTAL				

If you have not already given to the Annual fund this year, please consider giving at this time: \$					
Billing Information					
First Name (as it appears on your credit card):	Last Name (as it appears on your credit card):				
Street Address/P.O. Box:					
City:	State:	Zip:			
Home Phone:	Preferred Email:				
Select Payment					
☐ Check (make payable to Connecticut College)					
☐ Credit Card: ○ Visa ○ Mastercard ○ American Express ○ Discover					
Card #:					
Card Security Code (3-4 digit number found on the back of your credit card):					
Expiration Date:					

Questions? Please call 800-888-7549 ext. 2300 or email reunion@conncoll.edu.

**Annual Fund** 

Signature: