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:       Maiden Name:  
Last Name:            Class Year:   
Partner/Spouse/Guest First Name:     Partner/Spouse/Guest Last Name:    Class Year (if applicable):

To receive Reunion updates, please provide a preferred e-mail address for College announcements:

Registration Deadline
We cannot guarantee reservations for meals and on-campus accommodations that are received after Thursday, May 22, 2014 at 4 p.m. Refunds will be made for cancellations received before that date. Your $35 registration fee, however, is not refundable.

REGISTRATION FEE          Subtotal
                                      @ $35 per form =

Lodging
On-campus accommodations include breakfast in Harris Refectory. See the program for dining hours. Each class will be housed together in a residence hall:

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, Conn. if you prefer to stay off campus. To reserve 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 OF 1959 # of people =  @ $15/person =

Saturday class reception and dinner (Price includes full hour-long reception before dinner and all beverages)
CLASS OF 1959
BEEF # of meals =  @ $75/person =
CHICKEN # of meals =  @ $75/person =
VEGETARIAN # of meals =  @ $75/person =

DIETARY NEEDS (PLEASE SPECIFY IF YOU HAVE SPECIAL DIETARY NEEDS OR ALLERGIES):

GRAND TOTAL

CONTINUED ON BACK >
Annual Fund

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: ____________________________
Signature: ____________________________

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