

**MEMORIAL CLASS OF 1969  
50<sup>TH</sup> REUNION  
October 18-19, 2019**

Please complete form with payment

First: \_\_\_\_\_ Last: \_\_\_\_\_

Maiden Name (if applicable): \_\_\_\_\_

Spouse/Guest First: \_\_\_\_\_ Last: \_\_\_\_\_

Is your guest a 1969 Grad? Yes \_\_\_\_\_ Maiden Name: \_\_\_\_\_

No \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Veteran? Yes  No  If yes, Branch \_\_\_\_\_

**Please Select:**

Friday and Saturday # of Persons \_\_\_\_\_ @ \$120.00 each

Friday Only # of Persons \_\_\_\_\_ @ \$50.00 each

Saturday Only # of Persons \_\_\_\_\_ @ \$75.00 each

Reminder: Both Friday and Saturday Nights will be cash bar only and they will not accept credit cards.

Please complete this form and mail with check to:

Chuck Sullivan  
Memorial Class of 1969 Reunion  
P.O. Box 700327  
Tulsa, OK 74170-0327