

Jackson High School
Class of 1963
 40 Year Reunion

Registration Form

| | |
|---------------------------------|--|
| Name of Classmate: | |
| Street1: | |
| Street2: | |
| City, State, ZIP: | |
| Telephone: | |
| Email: | |
| Name of Spouse and/or guest(s): | |

Please list each name as you want it to appear on the nametag.

Sign up below for the various events of the weekend:

| Event | Price | Attendees | Total |
|---|-------|-----------|-------|
| Picnic and bonfire on Friday evening | Free! | | --- |
| Tour of the school on Saturday morning | \$5 | | |
| Golf Outing on Saturday afternoon | \$20 | | |
| The Main Event on Saturday evening | \$30 | | |
| Address Book only (included with the Main Event) | \$5 | | |
| Total enclosed (make checks payable to "JHS Class of 1963"): | | | |

Please return this form with your payment **by July 18** to:

Jeanette Childs
 1047 Grosvenor Road
 Grass Lake MI 49240

You can reach Jeanette at (517) 522-4389 or childs@dmci.net

I would be interested in some type of activity on Sunday (circle one): yes no maybe
 My suggestion: _____

Here is some information on another classmate:

Name of Classmate: _____
 Street Address: _____
 City, State, ZIP: _____
 Telephone: (____) _____
 Email address: _____
 Name of Spouse: _____