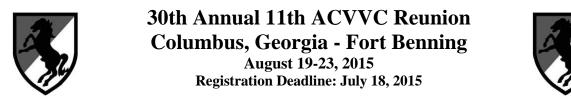
## **REGISTRATION FORM**



Registration fee is **\$105.00** per person. This fee is required for attendance at the Wednesday, Thursday and Friday night Bunker Parties and the Saturday lunch and Saturday evening banquet dinner. ALL RESERVATIONS MUST BE RECEIVED NO LATER THAN SATURDAY, <u>AUGUST 1, 2015</u>.

## PLEASE PRINT ALL INFORMATION (print clearly or use mailing label)

Name	Telephone No:	
Address		
City/State/Zip		
E-Mail Address		
Unit Assignment	Years in Country	
(Example: B TRP, D CO)	(Exa	umple: 1966-1967)
KIA Relative?		
Relationship to KIA: Unit: _		
ATTENDEES, INCLUDING YOURSELF (please p	rint)	\$
		\$
		\$
		\$
Total Registration Fee		\$
Banquet Meal Selection: Char-Grilled Rib Rye Steak (Indicate number for each selection)	Chicken Supreme	Veggie
Is this your first reunion?  Yes No Wheelch	air or special needs seati	ing? 🛛 Yes 🕞 No
Will you need bus transportation to events or will you drive	your own vehicle? 🗖 N	Need Bus 📮 Will Drive
□ Visa □ MasterCard		
Card No		Exp. Date
Signature (Required for credit card)		
Make checks payable to 11th ACVVC. Please mail I	Registration Form alon	ng with payment to:
11th ACVVC C/O OLLIE PICKRAL		

571 DITCHLEY RD KILMARNOCK, VA 22482