



## 2016 HCH All-School Reunion Registration Form

Name \_\_\_\_\_ Class of \_\_\_\_\_

Name Tag to Read \_\_\_\_\_

Spouse/Guest \_\_\_\_\_ Class of \_\_\_\_\_  
[if HCH grad]

Name Tag to Read \_\_\_\_\_

Address \_\_\_\_\_

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

Phone \_\_\_\_\_ Email \_\_\_\_\_

Miles Traveled (Direct Route) \_\_\_\_\_

I/We prefer to receive materials by email \_\_\_\_\_

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**Instructions:** Please select the events you plan to attend and indicate the number attending and total price.  
Make checks payable to **HCH Alumni Association** and mail to **PO Box 248, Hancock, MI 49930-0248**.

**REGISTRATION DEADLINE: July 1, 2016**

**Registration is required for attendance at any and all events.**

**Please note that registrations received AFTER July 1 are subject to a late fee of \$12 per person.**

	<u>\$/Person</u>	<u># Attending</u>	<u>\$ Total</u>
Registration Fee	\$12.00	_____	_____
Pasty Picnic	\$8.50	_____	_____
Memory Lane Mixer	\$12.50	_____	_____
Honors Brunch	\$15.00	_____	_____
Brunch Buffet			
Athletic Hall of Fame Induction			
Alumni Awards Presentation			
Alumni Association Annual Meeting			
	Total:	_____	_____
I/We are unable to attend, but enclosed are my/our 2016-2019 Alumni Association Dues	\$12.00	_____	_____