

Jesuit High School Class of 1988
20 Year Reunion Weekend Registration Form



Your Name: _____

Spouse/Partner Name: _____

Other Guest Name(s): _____

Preferred Contact Phone Number: (_____) _____

Preferred E-mail Address: _____

CAN'T MAKE IT TO THE WEEKEND?

Then let the guys know how you're doing. Just write a message on the reverse side of this registration form and we'll make sure to pass it along.

Date & Time	Event	Plan on Attending?	Number of guests attending	Cost per Guest
Friday Aug 08 5-7pm	Welcome Social	<input type="radio"/> Yes <input type="radio"/> No	Adults _____	Adults – \$6 Children – Free
Saturday Aug 09 Morning	Golf	<input type="radio"/> Yes <input type="radio"/> No		To Be Determined
Saturday Aug 09 5pm	Mass	<input type="radio"/> Yes <input type="radio"/> No		FREE!
Saturday Aug 09 6-10pm	Cookout/Luau	<input type="radio"/> Yes <input type="radio"/> No	Adults _____ Children _____	Adults – \$55 Children – \$10

Please mail this form and your payment in the enclosed return envelope by July 15th

**** Make checks payable to Jesuit High School of Tampa ****