



Registration Form
281st AHC Association 2017 Reunion
October 12th – 15th at the Hyatt Regency Hotel

Hotel will honor \$109+ / night rate w/ check in as early as Oct 11 and depart as late as Oct 16
Crystal City (Arlington), VA

Member #	Last Name	First Name	MI
Street Address		City	State Zip Code Phone #
Unit	E-Mail	10/ /2017 I Will Arrive on	
Name for Nametag	Dates in Country	Nick Name or Call Sign	

Is this your first time to a 281st Reunion Yes No (please circle)

REGISTRATION FEES:

281st AHC Assn. 2017 Annual Membership Dues: Annual Fee \$25 = \$

Member Reunion Registration: Member @ \$139 = \$

Guest Fee (16 years old and up) # Guests X \$139 = \$

Children's Fee (11-15 years old) # Guests X \$80 = \$

Scholarship Fund: My 2017 TAX DEDUCTIBLE CONTRIBUTION IS: \$

TOTAL CHECK IS: \$

Guest Name(s):

Saturday Banquet Meal Selection: *indicate number for each choice*

Beef _____ **Chicken** _____ **Seafood** _____ **Vegetarian** _____
(Roasted Sirloin Loin of beef) (Herb Roasted Chicken Breast) (Dill & Citrus Cured Salmon) (Vegetarian Lasagna Roulade)

LADIES' BRUNCH (Saturday Morning) Yes No (please circle)

PAYMENTS: Make check or money order payable to **281st AHC Association**. Mail Payment and the Registration Form no later than **September 15th** to:

281st AHC Association
c/o Fred Beck
205 Carey Ct.
Neenah, WI 54956-9208

Fred Beck Contact Information
Tel: 920-558-4127
email: JJB@new.rr.com

VOLUNTEER: Registration _____ PX _____ Hospitality Room _____ As Needed _____