



NCHS Class of '63 60 YEAR REUNION Registration Form

Name _____

Your Preferred Name for name tag: _____

Your Guest's Name for name tag: _____

Friday Evening Casual Get-Together: Will attend # _____ @ \$20 Each = _____

Saturday A.M. Forum, "Thoughts On Life" Yes please # _____ No Cost

Saturday Dinner Will attend # _____ @ \$55 each = _____

60th Reunion Memory Book _____ PDF by email @ \$2
_____ Hard copy by mail @ \$10

I also would like to make a donation to the NCHS 60th Reunion Fund _____
THANK YOU, Classmate!!

TOTAL AMOUNT enclosed = _____

Check payable to "NCHS Class of '63"

OR

Via Zelle To 317 697 8885

YOUR CURRENT EMAIL: _____

YOUR CURRENT MOBILE NUMBER: _____

SPECIAL DIETARY REQUIREMENTS: _____

Please mail the completed form and check to
Kathleen Anderson Hull, 7899 N Briarhopper Rd, Monrovia, IN 46157
OR EMAIL FORM TO hullk@ccrtc.com & pay via Zelle to 317-697-8885
Deadline for Reservations - postmarked by September 14

ALL REUNION EVENTS WILL BE AT OR NEAR
THE MARRIOTT INDIANAPOLIS NORTH HOTEL

For **Hotel Room Reservations** there, *click on the link at the top of this email
that says:*

"MARRIOTT DISCOUNTED ROOM RESERVATIONS"

OR Call the Indianapolis Marriott North directly: 317-705-0000

REFER TO: **"NORTH CENTRAL REUNION GROUP BLOCK"**