

Milton High School Class of 1964
50th Reunion Weekend Registration Form
September 19-21, 2014
Hilton Boston/Dedham

To help with planning for this event, please complete and mail this Reunion Weekend Registration Form with your payment as soon as possible.

Reunion Weekend Registration

First Name: _____

Last Name: _____

Maiden Name: _____

Home Phone Number: _____ Cell Phone Number: _____

Email Address: _____

Spouse/Guest Name: _____

Number of People Attending: _____

The cost of the **Reunion Weekend** (including both Friday's **Welcome Back Reception** and Saturday's **Grand Reunion Reception and Banquet** – with live entertainment) is \$125 per person.

Optional Saturday Events

(The Historical Bus Tour includes the new High School Tour)

Please reserve ___ seat(s) @\$10 for the Milton Historical Bus Tour
(buses leave the Hilton Boston/Dedham at 10 AM)

Please reserve ___ space(s) for the New Milton High School Tour, *FREE*

Amount Due

Number Attending Reunion Weekend X \$125: _____

Number Going on Historical Bus Tour X \$10: _____

TOTAL Payment: _____

Please make check payable to **MHS Class of 1964**
and mail with this form to:

Bob Cadigan
400 K Street
South Boston, MA 02127-4211