

## SELACO Alumni Association

### Reunion 2020 Registration

#### Registration Information:

Full Name: \_\_\_\_\_

Maiden Name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

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

TTY: \_\_\_\_\_ VP: \_\_\_\_\_

FAX: \_\_\_\_\_ Voice: \_\_\_\_\_

E-mail: \_\_\_\_\_

Do you wish to have your name and e-mail listed? Publicly \_\_\_\_\_ Private \_\_\_\_\_

#### For staff:

Year worked from: \_\_\_\_\_ to \_\_\_\_\_

#### For Student:

Year graduated: \_\_\_\_\_

#### Payment:

How many people? \_\_\_\_\_

**(Deadline is on or before June 15, 2020!)**

- 1 - \$75.00
- 2 - \$150.00
- 3 - \$225.00
- 4 - \$300.00
- 5 - \$375.00

**Please select Delicious Chicken Menu:** California \_\_\_\_\_ Vegetarian \_\_\_\_\_

**Credit card:** Master Card \_\_\_\_\_ Visa: \_\_\_\_\_

Card Holder Name: \_\_\_\_\_

Card Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Expiration Date: \_\_\_\_\_ / \_\_\_\_\_ CVV: \_\_\_\_\_

Signature: \_\_\_\_\_

**Note:** After the card is charged, the name "DEAFWORKS" will appear on your billing statement.

#### Mail this form to:

**SELACO Alumni Association**  
P.O.Box 1265  
Provo, UT 84603-1265

**Web:** <https://www.selaco.org>