



NAME BADGE FORM

Please type or print your name as you want it to appear on your badge.

Below is an example

Pedro Rescue Helicopter Reunion

14 - 18 June 2012

Seattle, Washington

'LEN'

SHULTS

SMSgt, USAF Ret.

FIREFIGHTER

Det. 56/10 ARRS, 1962 - 1965

Maxwell AFB, Alabama

Montgomery, Alabama

If you are retired military, and wish your retired Grade/Rank, Branch, Detachment/base & years, we will attempt to include them.

NAME: _____ **Nick Name:** _____

Military Ret: Grade/Rank _____ **Branch: AF** ___ **USA** ___ **USMC** ___ **USN** _____

Det/Base & Yrs. _____

Position & Grade/Rank (Then): _____

City & State you live in now: _____

SPOUSE or GUEST

NAME: _____ **Nick Name:** _____

(If no nickname, we will use first name)

(If more than one guest, attach sheet)

Send this page to: Leonard Shults, (address on reverse side)

PRHA REUNION REGISTRATION

14 - 18 JUNE 2012

Seattle, Washington

First Name: _____ Last: _____

Spouse First Name: _____ Guest: _____

Addr: _____ City: _____ St: _____ Zip _____

Area code/Phone # _____ Cell # _____

Are you driving? Y__ N__ Rental Veh? Y__ N__ Flying? Y__ N__ Hotel Registration? Y__ N__

Reunion Events

<u>Registration</u>	<u>Price</u>	<u>Number</u>	<u>Total</u>
Member/Spouse/Guest:	\$25.00 ea.	_____	_____
Mexican Buffet:	\$30.00 ea.	_____	_____
Banquet:	\$40.00 ea.	_____	_____
Trip 1, Boeing Plant	\$35.00 ea.	_____	_____
Trip 2, Olympia Air Show	\$40.00 ea.	_____	_____
Total:			\$ _____

The Banquet Entrée selection below: Please make your selection

- 1. Grilled Top Sirloin of Beef. With Mushroom Marsala Sauce.**
- 2. Chicken Oscar. Grilled Boneless, topped with crab, asparagus sauce.**
- 3. Lemon Seared Pacific Salmon. With Tarragon butter sauce.**

Select One For each person:

Name: _____ **Choice #** _____

Spouse/Guest Name _____ **Choice #** _____

**** Do you have a dietary need? Please inform us.**

(no salt, etc, _____) Special needs: (Wheel Chair, etc.)

The Buffet will be Seasoned Ground Beef & Chicken, Flour Tortillas, Refried Beans, Shredded Cheese, Chopped Onions, Sour Cream, Salsa, Lettuce & Tomatoes, Garden Salad & choice of dressings.

Rember to bring all personal medical Rx's with you! We suggest your Medical Living Wills & Medical Power of Attorney. Please list your EMERGENCY CONTACT BELOW.

Name: _____ **Relationship:** _____

Phone # _____ **Cell:** _____

Mail this page & Check: (made out to Leonard Shults) TO: Leonard Shults, 3708 Duquesne Drive. Montgomery, AL 36109, (questions: call: 334-273-9804)