Alumni Banquet Registration

Name: _____ Class Year _____

_____ Class Year _____

_____ Class Year _____

_____ Class Year _____

_____ Class Year _____

Address:_____

_____

Phone Number: _____

Email Address:_____

Return this from with your check to:
Chelsea Alumni Association, Inc.
P.O. Box 391
Chelsea, OK 74016

Banquet Pre-Registration
____ persons x $15 = $_____

Contributions
100th Year Project $_____

Scholarship Fund $_____

Total Amount Enclosed $_____