

# BANQUET RESERVATIONS FORM

**includes membership**

For records update

FULL NAME OF ALUMNI MEMBER \_\_\_\_\_ CLASS OF \_\_\_\_\_  
(Please include maiden name if applies)

MAILING ADDRESS: \_\_\_\_\_  
P.O. Box or Street / City / State and Zip Code

TELEPHONE #: \_\_\_\_\_  
(Please include area code)

E-MAIL ADDRESS: \_\_\_\_\_  
 check here if Alumni Association can list your email address on website and other lists

FULL NAME OF SPOUSE \_\_\_\_\_  
(Please include maiden name if applies-- also please note if deceased and or divorced)

If spouse is DCHS Alumni--Class of \_\_\_\_\_

**Fees: \$20.00 Per graduate of DCHS**  
(includes membership dues & banquet reservations)

**\$10.00 Per guest/spouse (not a graduate of DCHS)**

**Example: \$20.00 + 10.00 = \$30.00 OR 2 DCHS grads = \$40.00**

**Complete request for number of reservations:**

\_\_\_\_\_ **DCHS Grad @ \$20.00 each = \$ \_\_\_\_\_**

\_\_\_\_\_ **Guest/spouse @ \$10.00 each = \$ \_\_\_\_\_**

**TOTAL ENCLOSED = \$ \_\_\_\_\_**

**Name(s)** \_\_\_\_\_

Please print names that reservations are for as the info will be used to print name tags and place cards

If both you and your spouse are alumni members, please state which class you want to be seated with: \_\_\_\_\_

**We must receive reservations on or before May 25, 2010, to guarantee a seat with your class. Reservations received after deadline of May 25, 2010 can not be guaranteed a seat with your class nor name tags/place cards as the seating chart will be completed by this date. There have been people who have come the night of the banquet without reservations expecting the association to seat them with classmates, but again we can not guarantee that can be accomplished.**

Please make check payable to DCHS Alumni Association and mail to:

**DCHS Alumni Assoc. PO BOX 336., David City NE 68632**

**ARE YOU INTERESTED IN ATTENDING OPEN HOUSE AT HIGH SCHOOL?**

**YES \_\_\_\_\_ No \_\_\_\_\_**