

Personal						
Name (Maiden):						
Married Name:						
Marital Status: Single Married	Partnered Separated Divorced	☐Widowed				
Other (It's complicated)	_					
Contact Info (Only include what you want to share):						
Address:						
Phone:						
Email:						
Find me on: Facebook Twitter Other (specify):						
Kids Name(s) and Age(s):						
Occupation						
Title:	Company:	Years:				
Info						
Still in School?						
College/University/Trade School:						
Major/Area of Study:						
Info:						
All About Me!!!						

## Marshfield Class of 2002 Reunion

Hello Marshfield Class of 2002:

PLEASE DO NOT SEND CASH!!!

In order to prepare for our 10 year reunion we need to get an idea of how many people are attending each event. The reunion is taking place July 20<sup>th</sup> and 21<sup>st</sup>. The cost for is \$25 per adult and children are free. The \$25 fee will cover food provide Friday night (beverages are on your own) and the lunch on Saturday. Funds that are left over will be deposited in the Reunion Account and put towards the next reunion.

Please fill out the form below, detach and mail to the address provided.

Thank you!

		<u> </u>		) 		
~RSVP~						
Name (Maiden):						
Contact Number (jus	t in case ther	e are question	<u>s):</u>			
Friday Night Event:						
Yes No Tot	al # (Please inclu	ide if you are brin	ging your significan	it other):		
Saturday/Campus To	our:					
Yes No Tot	al # (Please inclu	ide if you are brin	ging your significan	nt other):		
Saturday/Lunch at B	astendorff:					
☐ Yes ☐No Tot	al #: Adults	Kids (c	old enough to eat):_			
What are your plans for S	aturday night (	Optional)?				
The cost for the Marshfie will cover the food provid Saturday. Any funds that towards the next reunion	le Friday night t are left over w	(beverages are o	n your own) and t	the lunch on		
Total enclosed: \$	2		Cl			