



# Peachtree High School Class of 1976 30 Year Reunion: April 29, 2006

## Payment/Reservation Form

### Personal Information

Full Name: \_\_\_\_\_  
*Last* *First* *M.I.*

Address: \_\_\_\_\_  
*Street Address* *Apartment/Unit #*

\_\_\_\_\_ *City* \_\_\_\_\_ *State* \_\_\_\_\_ *ZIP Code*

Home Phone: ( ) \_\_\_\_\_ Alternate Phone: ( ) \_\_\_\_\_

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

Name as you wish it to appear on name tag: \_\_\_\_\_

### Payment & Guest Information

Will you have a guest? \_\_\_\_\_

Guest's Name? \_\_\_\_\_

Payment Enclosed? \$ \_\_\_\_\_  
(\$75/person, DUE before April 21)

### Additional Information

Will you be taking advantage of the group rates for lodging at Best Western Suites? \_\_\_\_\_

Are you interested in attending a Friday evening casual gathering? \_\_\_\_\_

Comments or Suggestions? \_\_\_\_\_

### Memory CDROM

I cannot attend the reunion, but would like to receive a copy of the Memory CDROM. YES or NO \_\_\_\_\_

Please include \$5.00 to cover the costs associated with creating and duplication of the Memory CDROM.  
(Only those not attending.)

**Please submit your payment with this form to:**

76 Reunion c/o Tamara Phillips Meng  
1254 Village Terrace Court  
Dunwoody, GA 30338