

HOMECOMING WEEKEND REGISTRATION

October 19-20, 2018

All alumni & milestone reunion classes welcome

Name _____ Class Year _____

Specialty _____

Address _____

City _____ State _____ Zip _____

Mobile _____ Email _____

Guest Name(s) _____

Payment Information

Please make checks payable to the Marshall University Foundation.

American Express Visa MasterCard Discover

Credit Card# _____ Security Code _____ Exp. Date _____

Cardholder Signature _____ Date _____

Event	# Attending	Cost/Registrant	Total Amount
Friday, October 19			
Networking Lunch		N/A	
Lecture – Rosencrance		N/A	
Lecture – Blackwell		N/A	
Lecture – Becker		N/A	
Happy Hour		N/A	
Reunion Banquet		\$35*	
Saturday, October 20			
Tailgate Party		N/A	

*Complimentary to members of 1983 and 1988 classes

MAIL REGISTRATION TO:

Marshall University Joan C. Edwards School of Medicine
c/o Tami Fletcher

1600 Medical Center Drive, Suite 3408

Huntington, WV 25701

To register by phone, call 304-691-1701 or 877-691-1600 x1701.