



Reunion Friendly News REUNION PLANNER SUBSCRIPTION FORM

PLEASE ANSWER ALL QUESTIONS *IN BLACK INK* TO QUALIFY

I want to receive (or continue to receive) *TRNEWS*: YES NO
This is a NEW RENEWAL Subscription (circle one)
I am a VOLUNTEER Reunion Planner: YES NO (Check one)
Post Office Regulations Require a New Form Each Year

***If YOU are NO LONGER the PLANNER, Please Enter the NAME & ADDRESS of the NEW Planner
NON-Planners should enclose a check for \$30.00***

Date _____ Signature _____ Print Name _____

Spouse Name _____ Primary Address _____

City _____ State _____ Zip _____

2nd Address _____ What Months? From _____ To: _____

2nd City _____ 2nd State _____ 2nd Zip _____

Home Telephone _____ Work Phone _____ 2nd Home Tel _____

E-Mail Address _____

YOUR Group Name _____ If Military: Branch of Service _____

Members You Send Newsletter to? _____ Your Group Years in Active Service: From _____ To _____

Your LAST Reunion: YEAR _____ MO _____ How Many Came Incl Guests _____

Where? Hotel _____ City _____ State _____

Your NEXT Reunion: YEAR _____ MO _____ How Many Expected Incl Guests _____

Where? Hotel _____ City _____ State _____ Room Rate _____

Your NEXT UNBOOKED Reunion: YEAR _____ MO _____ Preferred Dates _____

How Many Expected Incl Wives & Guests _____ Expected # Rooms Peak Night _____ How Many Nights? _____

What City, State, or Part of the Country _____

Are You Considering a Cruise? & If so, Where? _____

PLEASE CHECK ONE: I MAKE THE DECISION I AM PART OF THE COMMITTEE THAT DECIDES WE PUT IT TO A VOTE

Do You Plan for other Military Groups? If Yes, please list

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