

7TH ARMORED DIVISION ASSOCIATION—69TH ANNUAL REUNION

September 9-13, 2015

- ◆ **Airport:** Kansas City International Airport (MCI)
- ◆ **Hotel Reservations:** Hilton Kansas City Airport 800-445-8667/816-891-8900
- ◆ **Enter below:** NUMBER of people participating in each activity and **TOTAL** amount
- ◆ **Send:** * **CHECK OR MONEY ORDER** * payable to: 7th Armored Division Assn.
- ◆ **Mail to:** Cheryl M. Higley
7th Armored Division Assn.
292 Scott Swamp Rd.
Farmington, Ct 06032

CUT OFF DATE:
AUGUST 7, 2015

** You may write one check for the Activities, Dues, Jackpot and Donations. **

ACTIVITIES	Price Per	# of People	TOTAL
Thursday, Sept. 10 @ 9 am - 5 pm TRUMAN LIBRARY/KANSAS CITY TOUR <i>* HONOR OUR VETERANS LUNCHEON *</i>	\$25		
Friday, Sept. 11 @ 9 am - 3 pm FT. LEAVENWORTH TOUR Tour of the Frontier Museum as well as riding tour of Fort. Leavenworth w/guide. <i>*Pay at time of lunch at DFAC (Mess Hall): \$5.55 per person (Cash Only)</i>	\$25		
Friday, Sept. 11 @ 5:30 pm BUSINESS MEETING & BBQ Have Dinner and Meeting! One of our local members has graciously offered to bring us some delicious BBQ & Fixings while we have our business meeting. <i>* We need a head count, so please indicate number of attendees. *</i>	FREE		
Saturday, Sept. 12 @ 6 p.m. <i>*BANQUET*</i> <u>Choose one per person</u> Sliced Roast Beef: w/Cabernet-mushroom Demi Glaze	\$32		
Chicken Marsala: Sautéed breast of chicken W/Mushroom Marsala Sauce <i>Served with Risotto</i>	\$32		
Vegetarian: Chef's Choice (most likely pasta)	\$32		
<i>* All Meals include: Soup, Starch, Vegetable, Dessert & Coffee/Iced Tea</i>			
Mandatory Per Person Registration Fee	\$20		
* Total Amount Payable to: 7th Armored Division Assn.			

Please Print Name:

First _____ Last _____

Nickname _____

Unit: Company _____ Battalion _____ First Reunion? Yes ___ No ___

Street Address _____

City _____ State _____ Zip _____

Phone # _____

Spouse's Name (if attending) _____

Guest Names _____

* * *

Emergency Contact _____

Phone # _____

Your Arrival Date _____ Departing Date _____

* * *

- ♦ **ACTIVITY CANCELLATIONS: NO REFUNDS** after—**August 21, 2015** (*But we will try and work with you*)
- ♦ **RETURNED CHECKS:** \$25 charge fee
- ♦ **CANCELLED CHECK:** Serves as your Confirmation
- ♦ **CANCEL ROOM RESERVATION:** Call **1-816-891-8900** to cancel. Refunds given only for cancellations up to 24 hours prior to arrival.

NO EMAIL OR WALK IN REGISTRATIONS ALLOWED

—YOU MUST BE PREREGISTERED!

* * *

QUESTIONS/CANCELLATIONS OF EVENTS: Cheryl Higley 860-678-1018

. . . LUCKY SEVENTH JACKPOT DRAWING. . .

First Prize \$200....Second Prize \$150....Third Prize \$100...Fourth Prize \$50

Winners need not be present

Name _____ Unit _____

Address _____ Ph.:# (____) _____

City _____ State _____ Zip _____

LUCKY 7TH JACKPOT	1 TICKET	\$5.00 _____
	3 TICKETS	\$10.00 _____

DUES ENCLOSED: \$15.00 _____

NOTICE: 2015-2016 DUES should be paid by June 30, 2015

(PRESENT LIFE MEMBERS: NO PAYMENT FOR DUES)

TOTAL: _____

* * *

Memorial Services Information

I would be honored to represent my unit in the Memorial Services.

Yes _____ **

I would also represent another unit, as alternate if needed.

Yes _____ No _____



***Please do not check—Yes—if you are unable to perform the duties of the Memorial Service. Those registering early and who are able to perform the duties of the Memorial Service will have first choice in covering their specific units. Every effort will be made to give you your unit to represent—however—you may be assigned to represent another unit if yours is already filled.*