

**Coventry High School Alumni Association, Inc. 85th All-Class Reunion 2019
Attendee Registration Form**

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Phone Number: _____ Email Address: _____

What year did you graduate from Coventry High School? _____

Save the Stamp and Register Online at: <https://tinyurl.com/caareunion>

Guest Information:

First Name: _____ Last Name: _____

Phone Number: _____ Email Address: _____

What year did your guest graduate from Coventry High School? _____

Classes will be seated together. If you and your guest graduated during different years from CHS, which class would you like to sit with? _____

Tickets:

- Payment by Check **\$50 per person** - \$55 after September 1st
- Payment by Credit Card **\$52 per person** - \$57 after September 1st

Hotel rooms are available at the Radisson Airport Hotel located at 2081 Post Road in Warwick, RI. Rooms available for \$99.00 plus tax. If you are interested in booking a room, contact 401-739-3000 or book your room at <https://www.radisson.com/coventry>.

What size T-Shirt/Sweatshirt do you wear? _____

The Coventry High School Alumni Association, Inc. is selling advertisements for the Commemorative Event Program Book. Businesses, organizations, and individuals are welcomed to purchase advertising. See below for advertising options.

- Full Page Advertisement in Event Program **\$125**
- 1/2 Page Advertisement in Event Program **\$70**
- 1/4 Page Advertisement in Event Program **\$35**
- Business Card Size Advertisement in Event Program **\$15**

All advertisements and logos need to be print ready. Send all advertisements and logos to tarahandzachary@tmwproductions.biz

Advertisement Deadline: 10/1/19

Advertisement Specs: Program Size: 5" x 8.5" | (L X H) Full Page: 5.5" x 8.5" | 1/2 Page: 5.5" x 4.25" | 1/4 Page: 2.75" x 4.25" | Business Card: 2" x 3"

Total Amount Due: \$ _____

*Make checks payable to the Coventry High School Alumni Association, Inc. and send to Tarah Warner, P.O. Box 1052 East Greenwich, RI 02818

Credit Cards Accepted

Name on Credit Card: _____

Credit Card Number: _____ Type of Card: _____

Security Code: _____ Expiration Date: _____

Signature: _____

By signing, I agree to allow Coventry High School Alumni Association, Inc. to charge my credit card.