

60TH **REUNION** Reservation Form



Return No Later Than August 1, 2016

Name:		Class Year:	Spouse/Guest:		Cl	ass Year:
Address:						
City/Town:_				State:	Zip: _	
Phone:		Eı	mail Address:			
Thursda	ay, Sep	tember 15, 2016	Friday, Sept	ember 16,	2016	
Check in a	t Buchar	an Alumni House 12 p.m 3 p.m.	Memorial Serv	rice		
Each person Please indica on each tour # attending	n may cho ate your to r. Bus seat Time 2:00 p.m. 2:30 p.m. 2:30 p.m. 2:30 p.m. getting of	Buildings/Facilities ose ONE tour from the list below. Our preference and how many people will be ing is limited. Tour Advanced Structures and Composites Center New Balance Field House Emera Astronomy Center New Media Center off the bus to walk through the buildings. Tra require standing and/or walking for up toostly seated.	Please indicate you on each tour. Bus seem that the seem to the se	choose ONE t ur tour prefere reating is limite Tour a.m. New Med a.m. Advanced a.m. Emera As og off the bus mera require	our from the list be ence and how many ed. lia Center d Structures and Com tronomy Center to walk through th standing and/or wa	people will be nposites Center ne buildings.
You can cho	Time 3:30 p.m. ose the ric	Tour Riding tour of campus ding tour even if you go on a building tour. You the bus to visit any buildings. Bus seating is	Class Business # attending Time Noon Lunch # attending Time	Meeting Location Foster Bo	ard Room, Buchanar Room, Buchanan Al	Cost
_	Time 5:00 p.m.	Location Wells Conference Center		f dressings, ga	# attending x \$ erved with a fresh g arlic and Italian brea e on reverse side.	jarden salad
All-Alumr # attending		Location Co	Saturday, Sej	otember 1	7, 2016	
		Wells Conference Center # attending x \$20.00 = \$	Pancake Break # attending Time	fast Location .m. Dirigo Pin	es	
Dinner selec	Lobster Vegetak	nse note any dietary restrictions on reverse side. Newburg Die Wellington with Red Pepper Coulis	—	for the Art	s Gala & Show # attending x \$	Cost 43.25 = \$
#	Maine B	reast of Chicken Stuffed with Theese and topped with Blueberry Chutney	Total Reunion A		tion section on the I	\$





Pay	ment Options			
	CHECK (Payable to UMAA)			
	CHARGE my credit card in the amount of \$			
	☐ VISA ☐ Master Card ☐ Amer Exp ☐ Discover			
	Card #	Exp Date	CVV	
	Name On Card			
	Address Associated with Card			
	Signature			
	Send To			
A P	JMaine Alumni Association Attn: Diane Muir			
Diet	2.O. Box 550 Orono, ME 04473-0550			
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