

IMMACULATE CONCEPTION 40th REUNION RESERVATION FORM

October 6-7, 2006

Reservation deadline: September 1, 2006

The reunion committee is working hard to arrange a fabulous weekend for all of us to get together to enjoy good food, good company, and good times. Let's renew old friendships and make some new ones; have a dance or two and a few laughs. Many of our classmates have already expressed an interest in attending. We look forward to seeing you in October!

PLEASE COMPLETE THIS PAGE AND RETURN IT WITH YOUR PAYMENT

ICHS Alumnus Name _____ Phone _____

Spouse or Guest Name _____

Please make _____ reservations @ \$50.00 each = \$_____ total due

Friday night reunion warm-up party (included). Attending? Yes No

Make check payable and mail this page to **BARBARA WAGNER** by **SEPTEMBER 1**.
Barbara Wagner
1 Maple Tree Ct.
Elmhurst IL 60126

Are you interested in a tour of IC High School on Saturday? Yes No

Your personal information for a reunion directory

First Name _____ Middle Initial _____

Maiden Name _____ Last Name _____

Address _____

City _____ State _____ ZIP _____

Home Phone _____ Work Phone _____ Cell Phone _____

Email _____ Birthday _____ Spouse Name _____

Other info/comments/questions (use other side if necessary):
