

Alumni Banquet Registration



Name: _____ Class Year _____

_____ Class Year _____

_____ Class Year _____

_____ Class Year _____

Address: _____

Phone Number: _____

Email Address: _____

Return this from with your check to:
Chelsea Alumni Association, Inc.
P.O. Box 391
Chelsea, OK 74016

Banquet Registration
_____ persons x \$12 = \$ _____

Contributions
Beautification Project \$ _____
Scholarship Fund \$ _____
Total Amount Enclosed \$ _____