

## 106TH INFANTRY ACTIVITY REGISTRATION FORM

Listed below are all registration, tour, and meal costs for the reunion. Please enter how many people will be participating in each event and total the amount. Send that amount payable to ARMED FORCES REUNIONS, INC. in the form of check or money order. Your cancelled check will serve as your confirmation. Returned checks will be charged a \$20 fee. You may also register online and pay by credit card at [www.afr-req.com/106inf2019](http://www.afr-req.com/106inf2019) (3.5% convenience fee will be added to credit card charges). All registration forms and payments must be received by mail on or before August 1, 2019. After that date, reservations will be accepted on a space available basis. We suggest you make a copy of this form before mailing. Please do not staple or tape your payment to this form.

**Armed Forces Reunions, Inc.**  
**322 Madison Mews**  
**Norfolk, VA 23510**  
**ATTN: 106<sup>th</sup> INFANTRY DIVISION ASSN**

OFFICE USE ONLY	
Check # _____	Date Received _____
Inputted _____	Nametag Completed _____

	Price Per	# of People	Total
<b>CUT-OFF DATE IS 8/1/19</b>			
<b><u>REGISTRATION PACKAGE</u></b>			
Includes <b>Banquet</b> on Saturday, <b>Boston City Tour</b> on Thursday, and various reunion expenses. <i>Please note breakfast for two people is included in your hotel room reservation. If you have more than two people in your room, please contact the hotel to purchase breakfast. Breakfast vouchers will be distributed at the front desk of the hotel upon check in.</i>			
<b><u>INCLUDED IN REGISTRATION PACKAGE</u></b>			
<b>Please select entrée choice and include number of people</b>			
SATURDAY BANQUET, 9/7:			
Grilled New York Sirloin Steak		#	
Chicken Piccata		#	
Baked New England Scrod		#	
Pasta Primavera (Vegetarian Entrée)			
Per-Person Registration Fee Submitted <b>BEFORE 8/1/19</b>	\$ 165	#	\$
Per-Person Registration Fee Submitted <b>AFTER 8/1/19</b>	\$ 175	#	\$
<b><u>ADDITIONAL TOURS</u></b>			
FRIDAY, 9/6: Mystic Seaport	\$70	#	\$
Total Amount Payable to <b>Armed Forces Reunions, Inc.</b>			\$

**PLEASE PRINT NAME AS YOU WANT IT TO APPEAR ON YOUR NAMETAG**

FIRST \_\_\_\_\_ LAST \_\_\_\_\_ EMAIL \_\_\_\_\_

UNIT \_\_\_\_\_ COMPANY OR BATTERY \_\_\_\_\_ 1<sup>ST</sup> REUNION? (YES\_\_\_) (NO\_\_\_)

SPOUSE NAME (IF ATTENDING) \_\_\_\_\_ GUEST NAMES \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY, ST, ZIP \_\_\_\_\_ PH. NUMBER (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

DISABILITY/DIETARY RESTRICTIONS \_\_\_\_\_

*(Sleeping room requirements must be conveyed by attendee directly with hotel)*

MUST YOU BE LIFTED HYDRAULICALLY ONTO THE BUS WHILE SEATED IN YOUR WHEELCHAIR IN ORDER TO PARTICIPATE IN BUS TRIPS?  YES  NO **(PLEASE NOTE THAT WE CANNOT GUARANTEE AVAILABILITY).**

EMERGENCY CONTACT \_\_\_\_\_ PH. NUMBER (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

For refunds and cancellations please refer to our policies outlined at the bottom of the reunion program. **CANCELLATIONS WILL ONLY BE TAKEN MONDAY-FRIDAY 9:00am-5:00pm EASTERN TIME (excluding holidays).** Call (757) 625-6401 to cancel reunion activities and obtain a cancellation code. Refunds processed 4-6 weeks after reunion.

You may also register online and pay by credit card at [www.afr-req.com/106inf2019](http://www.afr-req.com/106inf2019)