

**4/9 INFANTRY MANCHU (VIETNAM) ASSOCIATION ACTIVITY REGISTRATION FORM  
SEPTEMBER 13 – 17, 2017**

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-reg.com/Manchu2017](http://www.afr-reg.com/Manchu2017)** (a 3.5% convenience fee will be added). All registration forms and payments must be received by mail on or before **August 11, 2017**. 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: 4/9 INFANTRY MANCHU**

<b>OFFICE USE ONLY</b>	
Check # _____	Date Received _____
Inputted _____	Nametag Completed _____

**CUT-OFF DATE IS 08/11/17**

	Price Per	# of People	Total
(Price includes green fees and cart; equipment is \$20 extra at the course) <b>MANCHU GOLF TOURNAMENT</b>	\$ 34		\$
<b>TOURS</b>			
THURSDAY, 9/14: CITY TOUR	\$ 39		\$
FRIDAY, 9/15: NATIONAL MUSEUM OF THE PACIFIC WAR	\$ 46		\$
FRIDAY, 9/15: ESTHER'S FOLLIES	\$ 70		\$
SATURDAY, 9/16: MISSIONS TOUR	\$ 30		\$
<b>MANDATORY PER PERSON REGISTRATION FEE</b>			
Includes Saturday Banquet Dinner and various reunion expenses.			
<b>MANCHU MEMBERS:</b>			
Sliced Roasted Beef Tenderloin	\$ 70		\$
Chicken Roulade with Roasted Cream	\$ 70		\$
Vegetarian Option	\$ 70		\$
<b>SPOUSES AND/OR GUESTS:</b>			
Sliced Roasted Beef Tenderloin	\$ 50		\$
Chicken Roulade with Roasted Cream	\$ 50		\$
Vegetarian Option	\$ 50		\$
CHILDREN UNDER AGE 12 (please indicate # attending). Banquet (kid's meal) and registration is complimentary.	FREE		
<b>Total Amount Payable to <u>Armed Forces Reunions, Inc.</u></b>			\$

PLEASE PRINT NAME AS YOU WOULD LIKE IT TO APPEAR ON YOUR NAMETAG

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

MONTH/YEARS SERVED (EX: NOV68-DEC69) \_\_\_\_\_ COMPANY \_\_\_\_\_ PLATOON \_\_\_\_\_

SPOUSE NAME (IF ATTENDING) \_\_\_\_\_ EMAIL \_\_\_\_\_

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. Call (757) 625-6401 to cancel reunion activities and obtain a cancellation code. Refunds processed 4-6 weeks after reunion.