**SAM HOUSTON CLASS OF 1965**

Registration Form for 50th Year Reunion

*Date:* **Saturday, October 3, 2015**

*Place:* **Sam Houston Race Park Pavilion**, 7575 N. Sam Houston Parkway West,

 Houston, TX 77064, (located between Bammel North Houston and Gessner)

*Time:* **11:00 am To 5:00 pm** – (lunch at 1:00pm)

*Cost:* Early Registration $25.00 per person; after Sept 7, $35.00 per person

A Memory Book will be provided to each classmate who attends. For those classmates who are unable to attend, Memory books will be available for $10, which covers the cost for shipping and handling.

Please email any **digital photos** of SH activities & friends which we can use in a slide show that will run continuously during the reunion. If you cannot make a digital image, you can mail a COPY (no originals) to Marilyn Henley. Email if you have any questions. Marilyn@ahenley.com

***Door Prizes Lots of space to visit Food Music Memorabilia Memory Book FUN***

*Registration:* Please complete attached registration form, make your check payable to Marilyn Henley and mail to **Marilyn Henley 5030 Cedar Spring Dr. Missouri City, TX 77459**.

**Complete & mail registration form with $25.00 per person fee (before Sept Sept 7).** Keep top portion. Please include the ’65 classmate’s maiden name

*Area Accommodations*: See attached list. We do **not** have any room blocks at this time.

**More information, updates, photos, lists of missing, deceased and ~~&~~ military service is available on the** 1965 SH Class Website at [www.shhs1965alumni.org](http://www.shhs1965alumni.org). Also, you can Join us on Facebook at [www.facebook.com/groups/SamHoustonHS1965](http://www.facebook.com/groups/SamHoustonHS1965)

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**Registration Form for 50th Year Reunion Sam Houston High School**

**Classmate Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Spouse’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Is Spouse Attending? Yes No**

 **(with Maiden name & class year if a SH Classmate of any year)**

**Guest (other than spouse)? Yes No Guest’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**City, State, Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Telephone(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**If we publish contact information, may we include yours? Yes No**

**If you would like to make a donation towards reunion expenses, you may include it in your $25 pp registration check. Donation $ \_\_\_\_\_\_\_\_\_ Mailed Memory Book ($10.00) $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **TOTAL AMOUNT ENCLOSED \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**