We strongly encourage registration online at [www.wesleyan.edu/rc](http://www.wesleyan.edu/rc).

If you prefer to register by mail, please send us this form by **May 6** to:
Wesleyan University c/o Reunion & Commencement Weekend
330 High Street
Middletown, CT 06459

Please clearly print the names of every attendee in your party and indicate their relationship to Wesleyan.

## SECTION 1 — PERSONAL INFORMATION

<table>
<thead>
<tr>
<th>LAST NAME</th>
<th>FIRST NAME</th>
<th>PLEASE CHECK ALL THAT APPLY</th>
<th>WESLEYAN CLASS/PARENT YEAR (IF APPLICABLE)</th>
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<tr>
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<td>WESLEYAN STUDENT OR ALUMNUS/A</td>
<td>WESLEYAN PARENT</td>
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**CONTACT INFORMATION**

ADDRESS ____________________________

CITY __________________ STATE _______ ZIP ________ COUNTRY (IF OTHER THAN U.S.) __________

DAYTIME PHONE (_____) __________________ E-MAIL ADDRESS ____________

☐ NEW/UPDATED INFORMATION

## SECTION 2 — MEALS

**FRIDAY WELCOME PICNIC**

☐ PERSON(S) @ $20 PER PERSON (INCLUDING WESLEYAN STUDENTS)

☐ CHILD(REN) @ $5 PER CHILD AGE 12 AND UNDER

**FRIDAY RED, BLACK & GREEN! DINNER**

☐ PERSON(S) @ $20 PER PERSON (INCLUDING WESLEYAN STUDENTS)

☐ CHILD(REN) @ $8 PER CHILD (12 AND UNDER WHO ARE NOT TAKING PART IN CAMP CARDINAL)

**FRIDAY SHABBAT DINNER**

☐ PERSON(S) @ $20 PER PERSON (INCLUDING WESLEYAN STUDENTS)

☐ CHILD(REN) @ $8 PER CHILD (12 AND UNDER WHO ARE NOT TAKING PART IN CAMP CARDINAL)

**SATURDAY ALL COLLEGE PICNIC & FESTIVAL ON FOSS HILL**

☐ PERSON(S) @ $10 PER PERSON (INCLUDING WESLEYAN STUDENTS)

**SUNDAY BRUNCH**

☐ PERSON(S) @ $18 PER PERSON (INCLUDING WESLEYAN STUDENTS)

☐ CHILD(REN) @ $5 PER CHILD AGE 12 AND UNDER

SECTION 2 SUBTOTAL  $ ____________
SECTION 3 — CAMP CARDINAL

FRIDAY (INCLUDES DINNER) 3 P.M.-MIDNIGHT
CHILD(REN) @ $50 PER CHILD

SATURDAY (INCLUDES LUNCH AND SNACK) 9 A.M.-4 P.M.
CHILD(REN) @ $50 PER CHILD

SATURDAY (INCLUDES DINNER AND SNACK) 4 P.M.-MIDNIGHT
CHILD(REN) @ $50 PER CHILD

NAME AND AGE OF EACH PARTICIPATING CHILD:

SECTION 3 SUBTOTAL  $ __________________________

SECTION 4 — PAYMENT

SECTION 2 SUBTOTAL  $ __________________________

SECTION 3 SUBTOTAL  $ __________________________

Please add this amount to my registration for financial aid through the Wesleyan Fund  $ __________________________

TOTAL for all Sections:  $ __________________________

Registrations must be postmarked by May 6, 2016.

TOTAL $________________________

FORM OF PAYMENT:  _____ CHECK (NUMBER __________)

_____ VISA  _____ MASTERCARD  _____ AMERICAN EXPRESS  _____ DISCOVER

ACCOUNT NUMBER (PLEASE PRINT CLEARLY) __________________________ SECURITY CODE __________

EXPIRATION DATE __________ NAME AS IT APPEARS ON CARD __________________________

SIGNATURE __________________________