Advance Registration Form

Please complete both sides of this form and return with total remittance no later than May 25 to:
Office of Alumni Relations and Annual Giving
Colby-Sawyer College
541 Main Street
New London, NH 03257

PLEASE TYPE OR PRINT CLEARLY

Your name ___________________________________________________________________________________________________________

LAST MAIDEN FIRST

Nickname ___________________________________________________________________________________________________________

Preferred first name or nickname for your name badge

Address _____________________________________________________________________________________________________________

City ______________________________________________________________________ State ________ Zip Code ___________________

Home phone ______________________ Business Phone___________________ E-mail _________________________________________

Spouse/guest ________________________________________________________________________________________________________

LAST FIRST

His/her nickname ____________________________________________________________________________________________________

Preferred first name or nickname for spouse/guest name badge

I/we expect to arrive on campus

☐ Friday morning  ☐ Friday afternoon  ☐ Friday evening  ☐ Saturday morning  ☐ Saturday afternoon

Residence hall accommodations If you plan to stay in a residence hall, reservations must be made in advance. Linens, pillows, blankets and towels will be provided.

I/We plan to stay in a residence hall:  ☐ Friday night  ☐ Saturday night

I/We wish to reserve a:  ☐ Single  ☐ Double  ☐ Family Suite (reserved for parents and children only)

I am sharing a double with (name) ______________________________________________________________________________________

My family will need:      _____ No. of rooms      _____ No. of beds

☐ I/We have other accommodations (please let us know where): _____________________________________________________________

Special needs Please let us know if you or your guest require special arrangements during the weekend.

Child care Child care will be available for children two years of age and older at the on-campus Windy Hill School for a fee of $5.00 per hour/per child beginning Friday at 6:00 p.m. Staff will provide your young children with opportunities for play and recreation in our school facilities. Meals will be provided. Advance registration and payment are required.

Friday (indicate times needed) ____________________________

Saturday (indicate times needed) ____________________________

(Please add up total hours of daycare coverage needed and transfer them to the back of this form.)

If you need child care for children under the age of two, please call the Office of Alumni Relations and Annual Giving to make arrangements.

To help us plan age-appropriate activities, please tell us the name(s) and age(s) of your child/children:

______________________________________________________________________________
I/We plan to attend the following:

NOTE: Checking any of the boxes for the workshops below does not commit you to attend these events. This section is simply for our use to determine space and material needs, etc.

**Friday**

**Learning Among Friends—Morning Session (choose one):**
- ☐ Understanding Movies: The Art of Film OR
- ☐ Exploring New Hampshire Aquatic Life

**Learning Among Friends—Afternoon Session (choose one):**
- ☐ Investigating and Interviewing in the Forensic Setting OR
- ☐ The Origins of Modernism
- ☐ Wine Glass Painting
- ☐ Main Street Tour
- ☐ Introduction to Yoga and Meditation

**Saturday**

- ☐ Sunnis and Shi’as in the Middle East
- ☐ Writing a Woman’s Life: M.E.W. Sherwood Talks Back
- ☐ Critical Role of Mothers in Youth Sports
- ☐ WSCS-FM
- ☐ Main Street Tour
- ☐ The World of Wine

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**Friday, June 1**

<table>
<thead>
<tr>
<th>Event</th>
<th>Number Attending</th>
<th>Subtotal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lunch @ $10 per person</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Class of 1957 Dinner Cruise @ $37 per person</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wine Pairing Dinner @ $35 per person</td>
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</tbody>
</table>

**Saturday, June 2**

<table>
<thead>
<tr>
<th>Event</th>
<th>Number Attending</th>
<th>Subtotal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breakfast Buffet @ $12 per person</td>
<td></td>
<td></td>
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<tr>
<td>Reunion Road Race @ $10 per person</td>
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<tr>
<td>Lunch with the President @ $15 per person</td>
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<tr>
<td>Gala Reunion Banquet @ $30 per person</td>
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**Sunday, June 3**

<table>
<thead>
<tr>
<th>Event</th>
<th>Number Attending</th>
<th>Subtotal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breakfast Buffet @ $12 per person</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Class of 1957 Farewell Brunch @ $12 per person</td>
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</tbody>
</table>

**Miscellaneous**

<table>
<thead>
<tr>
<th>Event</th>
<th>Number Attending</th>
<th>Subtotal</th>
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</thead>
<tbody>
<tr>
<td>Child care @ $5 per hour per child</td>
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</tbody>
</table>

**Residence hall reservations**

<table>
<thead>
<tr>
<th>Type of Room</th>
<th>Number Attending</th>
<th>Subtotal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Double room @ $20 per night per person (2 twin beds in a room)</td>
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<tr>
<td>Single room @ $25 per night per person (1 twin bed in a room)</td>
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<tr>
<td>Family suite @ $40 per night per family</td>
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</tbody>
</table>

**Total amount enclosed**

Total amount enclosed $________________

Please make checks payable to Colby-Sawyer College or pay by credit card. ☐ VISA ☐ MasterCard

Name ____________________________________________ Credit card number ________________________________

Expiration date ___________ Signature ____________________________

AS IT APPEARS ON CREDIT CARD