USS Westchester County, LST 1167, Association 2014 REUNION REGISTRATION FORM

Name	Member/guest	a) <u>\$ 135</u> x _	
		Subtotal = _	
	Nonmember/guest	b) <u>\$ 160</u> x _	
		Subtotal = _	
Spouse/Guest:			
Address:			
City:			-
Daytime phone:	Evening/other phone:		 _
E-mail address:			 _
Years served on the Wesco: 19	to 19		
Total package price per person for Me	mber & Spouse/Guest, \$135 X		\$ (1)
Friday, October 24, 2014 (Not include	ed in packet price: see additional pa	age)	
I would like to purchase tickets for	r the St. Augustine tour		
@ \$59.00 per person			\$ (2)
Additional Per Event Charges:			
Thursday, October 24, 2014			
I would like to purchase additiona	I tickets for the Welcome Reception	า	
@ \$25.00 per person			\$ (3)
Saturday, October 25, 2014			
I would like to purchase additiona	I tickets for the Wesco Banquet & I	estivities	
@ \$50.00 per person			\$ (4)
Sunday, October 26, 2014			
I would like to purchase additiona	I tickets for the Memorial Breakfast		
@ \$30.00 per person			\$ (5)
TOTAL (Rows 1, 2, 3, 4	·, 5)		
Check made out	to USSWCA, enclosed		\$
Make your check out to: USSWCA, a	and mail this form to :		
Richard Johannsen 15811 Jim Court	Jacksonville, Florida 32218		
For questions please call 904-517-742	6 or email rhino5847@comcast.ne	t	

Please note if your address, phone numbers, or e-mail have changed, please indicate any changes on this form so that we may keep the Contact List updated. **THANK YOU**