

New Buffalo All School Reunion

Reservation Form

Name: _____ Class _____

Guest: _____ Class _____

(Include maiden name when & where applicable)

Cost: \$60/person. Amount Enclosed: _____

*Make Checks payable to New **Buffalo All School Reunion***

Mail this form and your check to:

New Buffalo All School Reunion
PO Box 238
Union Pier, MI 49129