

## 2022 DOGFISH REUNION REGISTRATION

This form will serve the purpose of confirming your plan to attend and/or updating reunion records.

**\* Please respond even if you *don't* plan to attend\***

Name: (last) \_\_\_\_\_ (first) \_\_\_\_\_

Spouse/Other: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Check one: Plan to attend \_\_\_\_\_ Sorry, I can't \_\_\_\_\_

Item	Number Attending	Cost	Total Cost
Registration/Hospitality Room	_____	\$30.00/person	\$ _____
Thursday Lunch	_____	\$7.00/person	\$ _____
Saturday Dinner	_____	\$14.00/person	\$ _____
<b>Grand Total</b>			<b>\$ _____</b>

Please make check payable to JOHN CRONENBERG and enclose it with this form. Please try to return this registration form and your check so that I receive it no later than 08/31/2022.

Send to:  
JOHN CRONENBERG  
5511 Hemstreet Road  
Lohman, MO 65053

[cindyjohnc@gmail.com](mailto:cindyjohnc@gmail.com)