WELLESLEY COLLEGE

# CLASS OF 1976 REUNION



#### **Information & Details**

#### **Registration Fee**

The registration fee combined with the Alumnae Association's substantial subsidy make reunion weekend possible. There is no registration fee for children younger than 5 years. After May 19, no refunds will be given; alumnae registering after May 19 must register and reserve meals along with on-campus housing during reunion weekend. However, meal and room availability at that time will be limited and are not guaranteed. Guests must register, and pay the registration fee, in order to attend any reunion events (except for memorial services).

\*Non-refundable.

On-campus Housing (includes breakfast) Alumnae and guests who wish to stay on campus during reunion weekend must pay the registration fee plus the cost of housing. The cost includes towels, linens, two blankets per bed, a pillow, and breakfast. Each class is assigned to a residence hall. You may request a single room; otherwise, we will try our best to accommodate all rooming requests. Although on-campus housing is guaranteed to all alumnae, housing within your specific headquarters is not. In case your headquarters is oversubscribed, you will be placed in the nearest possible dormitory to your class. See brochure for area hotel information.

#### Class Insignia

Red nylon reusable, foldable bag, bearing the new Wellesley logo in white. It's perfect for shopping and errands. Stock up - it folds into a small drawstring pouch for easy portability and storage!

#### **Class Spirit Fund**

Voluntary contribution so that every classmate can afford to attend and enjoy our 35th reunion. Please consider donating \$25, \$50, \$76, or the amount of your choice.

For disability accommodation requests, please call 781-283-2321 or email reunionquestions@wellesley.edu at least 2 weeks in advance to give us time to review and respond to your needs.

# Go Green and Register Online! www.wellesley.edu/alum/reunion

## **Alumna Information**

Subtotal (page 1)

Name		
(First, College Last, Current Last, Preferred First as it s  Address	hould appear on name tag)	
Phone	Cell/other	ımber published in your class attendance lis
Email	a do not mant your con phone no	missi pusitina in your state attendance is
☐ New information above, please update my records.		
Emergency Contact Name		
Relationship and Phone		
Pre-existing Conditions		
(Optional — Any pre-existing conditions that may be h	elpful to medical personnel in case	of an emergency)
Registration Fees*		
Registration Fees (Early registration must be postmarked)	ed by April 14; late regist	ration must be postmarked
between April 15 and May 19, 2010)	1 nril 1 1 1	v \$40 —
Enter # of Alumnae early (by	. ,	x \$40 =
Enter # of Alumnae late (April	15-May 19)	x \$60 =
Enter # of Guests early		x \$40 =
Enter # of Guests late		x \$60 =
Enter Guests' Names:  (First & Last, as they should appear on name tags.)		
Enter # of Children 5–16 yrs e	x \$10 =	
Enter # of Children 5–16 yrs late		x \$15 =
Enter # of Children 0–5 yrs		x \$0 =
Enter Children's Names:		·
(First & Last, as they should appear on name tags. Ple	ase include ages.)	
Pomeroy Hall Housing		
	- I - III	
☐ I will NOT need a room	☐ I would like to	snare a room
☐ I would like a single room if (Please fill in all information below)	avallable	
☐ Friday Night	# of twin beds	x \$60/bed =
☐ Saturday Night	# of twin beds	x \$60/bed =
I prefer to share a room with**  **Please note that both parties must request one anot		modated.)
Class Insignia		
# of red bags		x \$10 =
Class Spirit Fund		
I would love to help my classr	nates attend reunio	n: Contribution =
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### Information & Details

#### **Friday Night Dinner**

Join your classmates for dinner in the Library.

#### **Saturday Picnic**

Come to the Academic Quad tent for food, fun, and a perfect time to reconnect.

#### **Saturday Social Hour and Class Dinner**

Join us for hors d'oeuvres and a gourmet seated dinner featuring a classic Wellesley dessert!

#### **Sunday Class Picnic**

Elegant box lunches with a variety of sandwiches (including a vegetarian option), fruit salad, chips, a cookie and bottled water.

If you have special dietary needs, please contact the Reunion Reservation Office by calling 781-283-2321 or emailing reunionquestions@wellesley.edu at least 2 weeks in advance to give us time to review and respond to your needs.

#### Children's Pizza Party/Movie Night

Saturday Alumnae Association Pizza Party and Movie 6 years+, 6 pm – 10 pm. Preregistration and payment are required to reserve a space at this activity. Walk-ins will not be accepted. Limited space available. Parents must be available to drop off and pick up children. Children, including teens, will not be allowed to leave without an adult.

#### **Financial Aid**

If you need financial assistance to attend reunion, call the Alumnae Association at 781-283-2343. All requests will be kept confidential.

#### **Class Events**

Friday Night Dinner						
Dinner Buffet	# of Children	n x \$15	+ # of Adults	x \$42 =		
Vegetarian Dinner Buffet						
	# of Children	n x \$15	+ # of Adults	x \$42 =		
Saturday Picn	ic					
Picnic Buffet	# of Children	n x \$10	+ # of Adults	x \$20 =		
Vegetarian Pici	Vegetarian Picnic Buffet					
	# of Children	n x \$10	+ # of Adults	x \$20 =		
Saturday Clas						
Grilled Salmon	Grilled Salmon with Mango Salsa					
	# of Children	n x \$25	+ # of Adults	x \$65 =		
Breast of Chick	ken Rubbed wi	ith Roaste	ed Garlic			
	# of Children	n x \$25	+ # of Adults	x \$65 =		
Wild Mushroom Ravioli with Asparagus Pesto						
	# of Children	n x \$25	+ # of Adults	x \$65 =		
Sunday Class						
Box Lunch		# of Chile	dren and Adults	x \$15 =		
Vegetarian Box	Lunch	# of Chile	dren and Adults	x \$15 =		
Children's Piz	za Party/Movi	ie Night	# of Children	x \$25 =		
Subtotal (pa	age 2)			=		
Subtotal (from page 1)			=			
Grand Total (add page 1 & 2 subtotals)				=		

#### **Payment**

I would like to pay by (circle one): VISA MasterCard Check (Checks should be made out to: Wellesley College Alumnae Association. Please mail checks to 106 Central St., Green Hall Room 246, Wellesley, MA 02481-8203)

Credit Card Number:

Expiration Date (mm/yy):

Name on Card:

Signature\*:

Credit Card Billing Address (if different from front):

<sup>\*(</sup>I hereby authorize the Wellesley College Alumnae Association to charge the above account for, and I agree to pay, the Grand Total amount added above. If the addition results in an overage, the WCAA is permitted to charge my account for the lesser amount. If the result is less than the actual amount due, the Reunion Reservation Office will contact me directly.)