

75th Anniversary Celebration

REGISTRATION FORM

In order to help make appropriate dinner arrangements for the Thursday Feb 23rd event we will need to know how many will be attending. Please make checks payable to [Kalamazoo ACS](#).

Mail payment and completed form to:

Dr. Andre Venter, KACS Treasurer

Department of Chemistry

Western Michigan University

Kalamazoo, MI 49008-5413

Your Name: _____

Email: _____

Phone number: _____

Number of attendees age 12 and over (\$10 each) = \$ _____

Number of attendees under age 12 (free) _____