

# 2015 BRO Reunion Registration Form Side A

## 2015 REUNION WESTIN LOMBARD LOMBARD, IL 17-21 JUNE

NAME (Please Print) \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

( ) \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_ E-MAIL \_\_\_\_\_

■ **Paying by Check:** Please make checks payable to:  
**SOCIETY OF THE FIRST INFANTRY DIVISION**  
**PO BOX 607, AMBLER, PA 19002-0607**  
**Phone: 215-654-1969**

■ **Paying by Credit Card:**  
(circle one): Visa / Master Card / American Express / Discover

Card Number

Expiration Date: Month \_\_\_\_\_ Year \_\_\_\_\_ (e.g. 11 14)

**MEMBERSHIP DUES**

Is your 2015 membership paid up? If not, please include your dues now. Dues are \$30 regular or \$60 executive.

Last four digits of your Social Security number: \_\_\_\_\_ (1) **DUES TOTAL: \$** \_\_\_\_\_

**MY ERA WHILE SERVING WITH THE BIG RED ONE**

I served in (circle one): WWII / Vietnam / Cold War / Desert Storm / Balkans / Peacetime / Iraq / Afghanistan

**REUNION NAME BADGE (PLEASE PRINT)**

■ **Your Name Badge**

Name on badge: \_\_\_\_\_

Unit: \_\_\_\_\_ War: \_\_\_\_\_

Is this your first Reunion? (circle one): Yes / No

■ **Spouse/Guest Name Badge**

Name on badge: \_\_\_\_\_

Unit: \_\_\_\_\_ War: \_\_\_\_\_

Is this your first Reunion? (circle one): Yes / No

■ **Guest Name Badge**

Name on badge: \_\_\_\_\_

Unit: \_\_\_\_\_ War: \_\_\_\_\_

Is this your first Reunion? (circle one): Yes / No

■ **Guest Name Badge**

Name on badge: \_\_\_\_\_

Unit: \_\_\_\_\_ War: \_\_\_\_\_

Is this your first Reunion? (circle one): Yes / No

**HOTEL RESERVATIONS—WESTIN LOMBARD**

*Hotel Reservation cut-off date: 21 May 2015*

**RATES**

All rooms begin at \$139 (plus tax) per night. An advance deposit is required to reserve each room, you will pay the balance of your bill at the hotel. This rate is good for 3 days before and after the reunion. **NO HOTEL RESERVATION CAN BE ACCEPTED WITHOUT YOUR REGISTRATION FEE.** Children under 18 stay free when sharing room with parents or grandparents.

**ROOMS**

Write the # of each type of room you'll need

1 Person/1 Bed \_\_\_\_\_ 1 Person/2 Beds \_\_\_\_\_

2 People/1 Bed \_\_\_\_\_ 2 People/2 Beds \_\_\_\_\_

3 People/2 Beds \_\_\_\_\_ 4 People/2 Beds \_\_\_\_\_

It is not possible to make a hotel reservation without this information. After May 21 all reservations are subject to availability of rooms by the hotel.

**SPECIAL REQUESTS**

Do you require a HANDICAPPED ROOM? \_\_\_\_\_

Do you use a WHEELCHAIR? \_\_\_\_\_

Do you need a room near an ELEVATOR? \_\_\_\_\_

Are you using OXYGEN? \_\_\_\_\_

**NOTE:** Accommodations are assigned by the hotel—NOT by the Society—and are subject to availability.

*You will receive a letter from us confirming all activities and accommodations for which you have paid.*

Please reserve the following accommodations for me at the Westin Lombard:

**ARRIVAL AND DEPARTURE DATES (REQUIRED)**

I will arrive at the hotel on (date) \_\_\_\_\_.

I will leave the hotel on (date) \_\_\_\_\_.

**FIRST NIGHT ROOM DEPOSIT**

Here is my first night's deposit for the rooms I've requested:

# of rooms with 1-2 people \_\_\_\_\_ @ \$139 = \$ \_\_\_\_\_

# of rooms for 3 people \_\_\_\_\_ @ \$154 = \$ \_\_\_\_\_

# of rooms for 4 people \_\_\_\_\_ @ \$169 = \$ \_\_\_\_\_

**(2) HOTEL SUBTOTAL: \$** \_\_\_\_\_

**SIDE B SUBTOTAL (TOURS & EVENTS)**

**(3) SIDE B SUBTOTAL: \$** \_\_\_\_\_

**REUNION REGISTRATION FEE**

All adults (age 18 and over) MUST pay the registration fee.

Number of people in your party: Adults \_\_\_\_\_ Children \_\_\_\_\_

Society members & families: # \_\_\_\_\_ adults @\$40/ea = \$ \_\_\_\_\_

Non-members: # \_\_\_\_\_ adults @\$70/ea = \$ \_\_\_\_\_

**(4) REGISTRATION FEE TOTAL: \$** \_\_\_\_\_

**GRAND TOTAL: Add lines (1) + (2) + (3) + (4):**

**PAYMENT ENCLOSED: \$** \_\_\_\_\_



# 2015 BRO Reunion Registration Form Side B

## TOURS & EVENTS

### Wednesday, 17 June

Chicago Stadiums Tour # \_\_\_\_\_ people @ \$53/ea = \$ \_\_\_\_\_

**WEDNESDAY TOTAL: \$** \_\_\_\_\_

### Thursday, 18 June

Golf Outing # \_\_\_\_\_ people @ (FREE) = \$ \_\_\_\_\_

Anchors Aweigh and Mini Marvels # \_\_\_\_\_ people @ \$70/ea = \$ \_\_\_\_\_

First Division Museum and Cantigny Park # \_\_\_\_\_ people @ \$5/ea = \$ \_\_\_\_\_

**THURSDAY TOTAL: \$** \_\_\_\_\_

### Friday, 19 June

Conflict Breakfast # \_\_\_\_\_ people @ \$18/ea = \$ \_\_\_\_\_

Includes: Scrambled eggs, bacon, potatoes, pastries, juice, coffee or tea. Everyone will be in one room.

Chicago Architecture Tour # \_\_\_\_\_ people @ \$60/ea = \$ \_\_\_\_\_

First Division Museum and Cantigny Park # \_\_\_\_\_ people @ \$5/ea = \$ \_\_\_\_\_

Maywood Park Racetrack # \_\_\_\_\_ people @ \$70/ea = \$ \_\_\_\_\_

**FRIDAY TOTAL: \$** \_\_\_\_\_

### Saturday, 20 June

Chicago River Cruise and Driving tour # \_\_\_\_\_ people @ \$70/ea = \$ \_\_\_\_\_

First Division Museum and Cantigny Park # \_\_\_\_\_ people @ \$5/ea = \$ \_\_\_\_\_

**SATURDAY TOTAL: \$** \_\_\_\_\_

### 97<sup>TH</sup> ANNUAL REUNION BANQUET

All adult meals include: Salad, Caramel Apple Pie, Coffee or Tea.

**Beef: Braised Short Ribs with Rosemary Pan Au Jus** # \_\_\_\_\_ adults @ \$45/ea = \$ \_\_\_\_\_

**Chicken: Herb Grilled Chicken Breast with Roasted Fennel Demi-Glaze** # \_\_\_\_\_ adults @ \$45/ea = \$ \_\_\_\_\_

**Fish: Seared Salmon Filet with Teriyaki Glaze** # \_\_\_\_\_ adults @ \$45/ea = \$ \_\_\_\_\_

**Vegetarian: Penne Pasta Primavera Grilled Vegetables in Pomodoro Sauce** # \_\_\_\_\_ adults @ \$45/ea = \$ \_\_\_\_\_

**Plain Chicken:** # \_\_\_\_\_ adults @ \$45/ea = \$ \_\_\_\_\_

**Kids Meal (12 & under):** # \_\_\_\_\_ children @ \$20/ea = \$ \_\_\_\_\_  
 Chicken fingers, fries, celery and carrots with ranch dressing fruit salad and dessert.

**BANQUET TOTAL: \$** \_\_\_\_\_

#### BANQUET SEATING

Special seating areas will be provided for the larger units. Smaller units will be seated with their Host CP Unit. Please circle your seating preference below:

2<sup>nd</sup>      16<sup>th</sup>      18<sup>th</sup>      26<sup>th</sup>      28<sup>th</sup>      CAV/Recon/Armor  
 Artillery    Avn/Engrs    HQ/Support Units    Other \_\_\_\_\_

#### SIDE B SUBTOTAL

Add up your Wednesday + Thursday + Friday + Saturday + Banquet Totals below.

**SIDE B SUBTOTAL: \$** \_\_\_\_\_

Now carry "Side B Subtotal" to line (3) on the front side of this Registration Form.