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Date Received	Date Pr	ocessed	Initials	Н	lousing			ID#	

## **CLASS OF 1946**

Reunion 2022 Registration

## Reunion Registration Deadline: May 8, 2022 Register Online at www.skidmore.edu/reunion

First Name	Maiden Name (if applicable)	Last Name					
Address							
City, State, Zip							
oity, state, zip							
Home Phone	Cell Phone	Work Phone	ork Phone				
	_						
Email Address	Nickname for Nametag						
Names of all guests attending (please include ages of children)							
Any special circumstances that the College should know about to make additional preparations for your arrival:							
Dietary Restrictions:							
Mobility Concerns (i.e. difficulty with stairs):							
mobility contents (i.e. difficulty with statis).							
Other:							
REGISTRATION FEES (Required of all		TOTAL					
Alumni Registration Fee	# of guests X \$165.00	·					
Guest Registration Fee	# of guests X \$150.00	\$					
	\$						
HOUSING (On campus in College Res	· · · · · · · · · · · · · · · · · · ·		NUMBER OF				
*Pre-registration is required for on-campus	ADULTS						
Friday Night – On Campus							
Saturday Night – On Campus							
I/we will be staying Off Campus at:							
	Н	OUSING SUBTOTAL	\$				
Housing Requests: Please list <i>UP TO 4</i> other alumni/guests you would like to be housed with/near.							
We will do our best to accommodate your request.							

Please submit your registration form ONE TIME via online, mail, or fax.\* Please contact the office with changes/additions.

Mail: Office of Alumni Relations & College Events, Skidmore College, 815 North Broadway, Saratoga Springs, NY 12866

Fax: (518) 580-5669 Phone: (518) 580-5610 or (800) 584-0115 (TOLL FREE)

\* For your security – DO NOT include credit card information on forms that are being emailed or faxed. Please call the office between 8:30 a.m. and 4:30 p.m. EST to provide that information to an individual over the phone.

	T			
MEALS (Pre-registration for all meals is required.)	NUMBER OF			
*Please indicate the number of adults participating in each meal.	ADULTS			
Friday Dining				
Lunch, Murray-Aikins Dining Hall, first floor				
All Alumni Welcome Party, Case Center Patio, Overlooking the Green				
Class Dinner, The Wishing Well, 745 Saratoga Road, Wilton				
Saturday Dining				
Breakfast, Murray-Aikins Dining Hall, first floor				
A Toast to the Scribner Society & Class Photo, Frances Young Tang '61 Teaching				
Museum and Art Gallery				
All Reunion Class Picnic, Upper South Park, Under the Tent				
Class Celebration Reception/Dinner, Scribner Carriage House				
Sunday Dining				
Breakfast, Murray-Aikins Dining Hall, first floor				
MAKE A GIFT to Skidmore College in honor of your Reunion and in support of Skidmore students and				
Reunion registration fee will be designated to support an annual Alumni Association Scholarship which will be awarded to a current Skidmore student. This gift will also count toward your overall class fundraising total. If you would prefer not to include a gift in your Reunion registration, please call the Office of Alumni Relations and College Events at (518) 580-5610.				
If you wish to make an additional gift beyond the \$5 included in your Reunion registration	Ś			
fee, please indicate that amount in the space provided to the right.	٦			
In regards to the COVID-19 Pandemic				
Skidmore College welcomes fully vaccinated and boosted visitors to campus for this weekend and has implemented safety measures. Masks are required for all attendees at both indoor and outdoor gatherings.				
By checking the box below, I acknowledge all guests included in this registration and I are fully vaccinated and boosted and will follow all campus protocols.				
Please see our visitors page for more information. https://skidmo.re/visitor_policy				
I have read the above statement and acknowledge all guests in our party are vaccinated and boosted will follow all COVID-19 campus protocols.				

REUNION REGISTRATION PAYMENT					
	TC	OTAL DUE	\$		
Payment Method (check one)  VISA MasterCard American Express Check/Money Order ("reunion registration" on memo line.)  Cardholder (Please include billing address if different from address		_ Discover	DID YOU REMEMBER:  To include your payment?  Indicate meal attendance?  Indicate housing for all		
Account	Exp.	CCV#	attending?		
Number Signature					