

# USS Edson DD946 ~ August 31 to September 04, 2016

Handley Hotel San Diego, San Diego, CA

Please complete this form and return it with your check on or before August 25, 2016.  
 Make checks out to the Tim Nightingale and on Memo line write USS Edson Reunion and  
 mail to 152 37<sup>th</sup> Drive SW, Vero Beach, Florida 32968-3166

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_  
 Spouse or Guest Name: \_\_\_\_\_ Spouse or Guest Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**If there should be an emergency during the reunion and we need to contact a member of your family, who should that be?**  
**Name:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_  
**Your Cell Phone or Travel Number in case there are any last minute changes:** \_\_\_\_\_

Banquet Meal Selection Member: (Circle One)  
*London Broil ----- Salmon ----- Vegetarian*  
 Banquet Meal Selection Spouse/Guest (Circle One)  
*London Broil ----- Salmon ----- Vegetarian*  
 Banquet Meal Selection Child/ Guest (Circle One)  
*London Broil ----- Salmon ----- Vegetarian*

If you have any special dietary, handicapped, or other special requirements, please provide the details below.  
 Handicapped Requirements: \_\_\_\_\_  
 Special Dietary Needs: \_\_\_\_\_

Your Badge Name: \_\_\_\_\_ Guest Badge Name: \_\_\_\_\_  
 Which years did you serve on board: \_\_\_\_\_ What was your highest rate while on board: \_\_\_\_\_

<b>Costs</b>	
<b>Tour #1</b>	
USS Midway Tour, Two Hour Harbor Excursion .....	@ \$75.00 pp ..... X _____ (# people) = \$ _____
<b>Tour #2</b>	
La Jolla, Mount Soledad, Balboa Park, Gaslamp .....	@ \$75.00 pp ..... X _____ (# people) = \$ _____
<b>and Downtown, then stop at Seaport Village and lunch at Bali Hai Restraint</b>	
Hospitality Room, & Registration .....	@ \$75.00 pp ..... X _____ (# people) = \$ _____
Saturday's Night Banquet Single/Child/Guest .....	@ \$55.00 single ..... X _____ (# people) = \$ _____
Saturday's Night Banquet Couple .....	@ \$100.00 couple..... X _____ (# people) = \$ _____
Yearly Dues .....	@ \$20.00 ..... = \$ _____
Life Time Dues .....	@ \$100.00..... = \$ _____
<b>TOTAL = \$ _____</b>	

*Everyone is required to pay for Registration and Hospitality Room.*

By checking this box I understand and acknowledge the refund policy below.

Refund Policy; Refund Policy; 90 days from reunion 80% refunded, 65 days from reunion 50% refunded,  
 45 days from reunion 25% refunded and 4 weeks before the reunion No Refunds.  
 A 5% Administration Fee will be charged on all registrations cancellations.