

RESERVATION FORM - LAKE FAMILY REUNION

NAME _____

ADDRESS _____

PHONE # _____

E-MAIL _____

\$ _____ **Adult Dinner \$10.00 # attending** _____

\$ _____ **Children Dinner (Age 3-10) \$5.00 # attending** _____

\$ _____ **Dues \$10.00 Adult/Family**

\$ _____ **General Donation**

\$ _____ **Scholarship Fund**

\$ _____ **Order from Family Store Order #** _____

\$ _____ **Salem Cemetery Upkeep Donation**

\$ _____ **Other:** _____

\$ _____ **TOTAL REMITTANCE**

Checks should be made payable to: Lake Family Historical Association

Mail to: Attn: Harry Lake
Lake Family Historical Association
P.O. Box 382
Ocean City NJ 08226

******* RESERVATION DEADLINE: August 24, 2016 *******