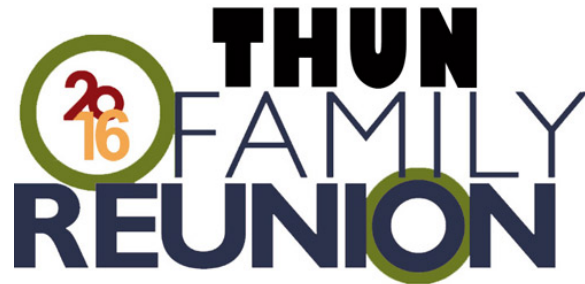


**Please return the attached form to RSVP and give your input regarding the reunion event.**

Another important function of the form is to help us update the family's contact information that is on file at the Foundation. If you have already replied via a hardcopy form you received through the mail, there is no need to submit the form below.



Thank you for your response to the family reunion and for verifying your contact information.

## Reunion Weekend Fee Schedule

**\$160 per adult; FREE for children ages 18 & under**

**Please note: Payment is due by March 28, 2016**

## Payment Options

1. **Pay by Credit Card:** The Foundation is using Square (a third-party provider) to process online credit card payments.

To pay by credit card, please notify Pat Swavely at 610-372-7626 or [pswavely@wyofound.org](mailto:pswavely@wyofound.org). She will send you an electronic invoice via email that you can pay with your credit card.

2. **Pay by Check:** Please make check payable to The Wyomissing Foundation and mail your total payment along with the attached form to:

The Wyomissing Foundation  
c/o Ms. Pat Swavely  
960 Old Mill Road  
Wyomissing, PA 19610

→ please see page 2 for the RSVP form

# THUN FAMILY REUNION RSVP FORM

*\* indicates required field*

\*Name: \_\_\_\_\_

Grandson/Granddaughter of: \_\_\_\_\_

Son/Daughter of: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number(s): \_\_\_\_\_

\*Email address: \_\_\_\_\_

\*Number of children (ages 18 and under) attending FREE: # \_\_\_\_\_

\*Number of adults attending: \_\_\_\_\_ X \$160 each = \$ \_\_\_\_\_

\*Registration Fee Total = \$ \_\_\_\_\_

I want to donate this additional amount: \$ \_\_\_\_\_ to help defray costs of the reunion.

Names of adults attending: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Names of children attending: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please mail (**with full payment if paying by check**) to:

The Wyomissing Foundation  
c/o Ms. Pat Swavely  
960 Old Mill Road  
Wyomissing, PA 19610