

**USS Beale DD/DDE-471 2020 Reunion  
REGISTRATION FORM**

Name: \_\_\_\_\_  
Spouse: \_\_\_\_\_  
Guest(s) (if applicable): \_\_\_\_\_  
Address: Street/PO Box: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
Telephone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Email address: \_\_\_\_\_ @ \_\_\_\_\_  
What years were served on USS Beale: \_\_\_\_\_  
Were you a Plank Owner: \_\_\_\_\_ 1942 or 1951  
What was your Rank or Rate: \_\_\_\_\_  
Will you be staying at the Higgins Hotel or elsewhere?  
\_\_\_\_\_

**Meals**

***MONDAY, 9/28, Annual Banquet at the Higgins Hotel***

**Total meals:** \_\_\_\_\_ (x) \$50.00 = \_\_\_\_\_ (A)

***WEDNESDAY, 9/30, Lunch & Show at World War II Museum***

**Total meals:** \_\_\_\_\_ (x) \$49.00 = \_\_\_\_\_ (B)

**Includes required 2<sup>nd</sup> Day Ticket for Admission to Museum**

**Museum Tour**

**Chaperoned Tour, Movie, Submarine:** \_\_\_\_\_ (x) \$34.00 = \_\_\_\_\_ (C)

**Or Chaperoned Tour & Movie only:** \_\_\_\_\_ (x) \$28.00 = \_\_\_\_\_ (D)

**Total of amount (ADD lines (A) + (B) + (C) +(D):** \_\_\_\_\_ **Total**

**Total amount of check:** \_\_\_\_\_

**Make your check payable to: USS Beale Association Inc.**

**Please mail this form with your check enclosed no later than June 15, 2020 to:**

Diane Sorola  
402 W. Convent St.  
Lafayette, LA 70501

Email: [sorolasorola@yahoo.com](mailto:sorolasorola@yahoo.com), Telephone: (337) 298-3434

Alternate Contacts: Bill Brings, Email: [boilerbum81@msn.com](mailto:boilerbum81@msn.com), Telephone: (321) 473-8497

Paul Barry, Email: [ussbealeinc@gmail.com](mailto:ussbealeinc@gmail.com), Telephone: (321) 338-5753

Please note. If you cannot print a copy of the Registration Form, contact us and we will mail a copy to you.