USS Beale DD/DDE-471 2018 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 International Palms or elsewhere?

_____

Meals

Dinner - SATURDAY, 10/13: Italian Dinner Buffet, Dolphin Room

Total meals: _____(x) $38.00 = _____ (A)

Dinner - SUNDAY, 10/14: Dinner Banquet, Dolphin Room

Total meals: _____Chicken Marsala (x) $36.00 = _____(B)

Total meals: _____Mahi Mahi(x) $38.00 = _____(C)

Total meals: _____Prime Rib (x) $40.00 = _____(D)

Total of amount (ADD lines (A) + (B) + (C) +(D): _____ Total

Total amount of check:_____

Make your check payable to: USS Beale Association Inc.

Mail this form with your check enclosed no later than June 1, 2018 to:

Paul Barry
607 Brockton Way
West Melbourne, FL 32904
Email: ussbealeinc@gmail.com, Telephone: (321) 327-3367

Alternate Contact: Bill Brings, Email: boilerbum81@msn.com, Telephone:Telephone: (727) 868-4453

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