LPHS - IWO JIMA CLASS ACTIVITY REGISTRATION FORM

Listed below are all the registration, tour, and meal costs for the reunion. Please enter a quantity for each event you and your guests wish to participate in. Then total your costs and send that amount payable to ARMED FORCES REUNIONS, INC. in the form of a check or money order. You may also register online and pay by credit card at https://www.events.afr-reg.com/e/LPHS2025 (online registrations have a convenience fee of 4%). Registration form and payment must be received on or before 8/18/25. After that date, reservations will be accepted on a space available basis. We suggest you make a copy of your completed form before mailing. Please do not staple or tape your payment to this form. (Returned checks will incur a \$20 fee)

MAKE CHECKS PAYABLE TO: Armed Forces Reunions, Inc. 322 Madison Mews Norfolk, VA 23510

ATTN: LPHS- Iwo Jima Class

OFFICE USE ONLY	Check #
Received	Inputted

Don't forget CUT-OFF date is 8/18/25	Price	# of Ppl	Total
MANDATORY REGISTRATION FEE – PER PERSON			
Registration Fee – Adult Members, Spouses and Guests	\$50		\$
Total number in your party (including member, spouse, and guests)			
<u>TOURS</u>			
Wednesday, 9/24 – Heard Museum/Arizona Capitol Museum	\$53		\$
Thursday 9/25 – City Tour	\$54		\$
Friday, 9/26 – Superstition Mountain Museum/Steamboat Lunch Cruise – was \$120 per person	\$99		\$
Saturday, 9/27 – Queen Creek Olive Mill (Please choose lunch selection): Lucca Turkey Sandwich Caprese del Piero Sandwich Italian Chopped Salad Olive Farmers Caesar Salad *all selections come with Kettle Cooked Chips, Vanilla Cupcake and Fountain Beverage	\$70		\$
MEALS – YOU MUST REGISTER FOR ALL MEALS YOU ARE ATTENDING (INCLUDING WELCOME RECEPTION)			
Wednesday, 9/24: Welcome Reception – Compliments of the Assoc.			
Thursday, 9/25 – Chuckwagon Dinner Buffet – was \$64 per person	\$59		
Friday, 9/26 – Italian Dinner Buffet	\$54		\$
Saturday, 9/27: Banquet (Please select your entrée)			
NY Strip	\$62		\$
Chicken Marsala	\$49		\$
Basil Salmon	\$57		
Vegetarian	\$44		\$
Total Amount Payable to Armed Forces Reunions, Inc.			\$

	ES AS YOU WISH THEM TO APPEAR ON THE NAMETAG:
	LAST
BRANCH: LI NAVY LIMARINES LI OTHER	1 ST TIME LPH ATTENDEE? YES \Box NO \Box
SHIP/UNIT:	PLANK OWNER: YES \square NO \square
DEPT/DIVISION:	YEARS ON BOARD (EX. 1965 – 1968):
SPOUSE / GUEST NAME(S)	
	PH
MEMBER STREET ADDRESS	
CITY, ST, ZIP	
DISABILITY / DIETARY RESTRICTIONS	
EMERGENCY CONTACT NAME	PH. #
DO YOU NEED TO BE HYDRAULICALLY LIFTED ONTO THE BUS I (PLEASE NOTE THAT WE CAN	N ORDER TO PARTICIPATE IN TOURS? YES \square NO \square Inot Guarantee availability).

(Special hotel room requirements must be conveyed by attendee directly to the hotel staff upon reservation)