

FWCC 70th Anniversary Event
REGISTRATION FORM
RSVP by September 1, 2007

Name(s) _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Yearly Meeting _____ Monthly Meeting/Church _____

I/We will attend the Friday evening reception at Haverford College

Number of people _____

Names _____

I/We will attend Saturday's events at Swarthmore Friends Meeting.

Number of people _____

Names _____

I/We will have lunch Number of people _____

Cost of lunch per person is \$20

I/We will have dinner Number of people _____

Cost of dinner per person is \$25

I/We won't be able to stay for any meals

Food preferences:

Vegetarian/Vegan (please specify)

Allergic to/don't eat: (please specify) _____

Transportation Needs

I/we will need a ride to/from Haverford College and our lodging at either *(please circle)*
Pendle Hill or the Howard Johnson Hotel Number of people needing ride _____

I/we will need a ride to/from Swarthmore Meeting and our lodging at either *(please circle)*
Pendle Hill or the Howard Johnson Hotel. Number of people needing ride: _____

OVER

Payment

Check enclosed for meals in the amount of \$ _____

Please charge my credit card in the amount of \$ _____

_____ Visa _____ Mastercard

Credit card number: _____

Expiration date: _____

Signature: _____

What was your earliest experience of FWCC? Please give year and event

If you have comments to share about your connection to FWCC, including current or past involvement in events, meetings, conferences, world gatherings, pilgrimages, committees, regional gatherings, visitation, etc. please add them below. Thank you!