



★ ★ ★ ★ ★ ★ ★ ★ ★ ★  
Minnewaukan Alumni Association  
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★ ★ ★ ★ ★ ★ ★ ★ ★ ★

### REGISTRATION FORM

Adult Registrations:

Name: _____	Year Graduated or Attended: _____
Name: _____	Year Graduated or Attended: _____
Name: _____	Year Graduated or Attended: _____
Name: _____	Year Graduated or Attended: _____

Others Attending:

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

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Registration Total: \$ \_\_\_\_\_ (\$30 per adult)

Cookbook Pre-order Total: \$ \_\_\_\_\_ (\$10 + \$3 shipping each)