

USMC COMBAT HELICOPTER & TILTROTOR ASSOCIATION ACTIVITY REGISTRATION FORM

Please enter how many people will be participating in each event and total the amount. Send that amount payable to ARMED FORCES REUNIONS, INC. in the form of check or money order. Your cancelled check will serve as your confirmation. Returned checks will be charged a \$20 fee. You may also register online and pay by credit card at <https://www.events.afr-reg.com/e/Popasmoke2024> (online registrations will be charged a one-time convenience fee of 3.5%). All registration forms and payments must be received on or before July 01, 2024. After that date, reservations will be accepted on a space available basis. Please do not staple or tape your payment to this form.

Armed Forces Reunions, Inc.
322 Madison Mews
Norfolk, VA 23510
ATTN: POPASMOKE

OFFICE USE ONLY

Check # _____ Date Received _____
 Entered _____ ☐ New ☐ Revised

CUT-OFF DATE IS 07/01/24

REGISTRATION PACKAGE

MANDATORY FOR EVERY PERSON ATTENDING THE REUNION
Includes souvenirs and reunion expenses.

	Price Per	# of People	Total
Member Registration Package	\$ 45	#	\$
Spouse/Guest Registration Package	\$ 45	#	\$
Children (under 18 years)	\$ 25	#	\$
Reunion T-shirt (one shirt included in each registration fee). Please indicate size MENS <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL <input type="checkbox"/> XXXL <input type="checkbox"/> XXXXL LADIES <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL <input type="checkbox"/> XXXL CHILDRENS <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL			
OPTIONAL TOURS			
THURSDAY 8/1: Memorials and Monuments Tour with Transportation	\$60	#	\$
FRIDAY 8/2: Golf Tournament (Medal of Honor) all ages – Course Information Pending – PAY AT COURSE - \$45 Estimated Per Person Charge		#	
FRIDAY 8/2: Steven F. Udvar-Hazy Center with Transportation	\$58	#	\$
FRIDAY 8/2: 8 th and I with Transportation	\$58	#	\$
SATURDAY 8/3: National Museum of the Marine Corps with Transportation	\$61	#	\$
MEALS			
Thursday Welcome Meal Baked Chicken.	\$ 52	#	\$
Thursday Welcome Meal Baked Tilapia	\$ 52	#	\$
Thursday Dinner Under 10 Chicken fingers	\$ 25	#	\$
Saturday Banquet London Broil	\$ 52	#	\$
Saturday Banquet Chicken Picatta	\$ 52	#	\$
Saturday Dinner Under 10 Chicken fingers	\$ 25	#	\$
If not paid yet, include your \$45 Annual Assoc. Dues or 2 year \$80		#	\$
Total Number of Guests Attending		#	
Total Amount Payable to Armed Forces Reunions, Inc.			\$

PLEASE PRINT NAME AS YOU WISH IT TO APPEAR ON YOUR NAMETAG:

FIRST _____ LAST _____ YEARS IN COUNTRY 19____ - 19____

PRIMARY SQUADRON: _____ IN COUNTRY SQUADRON(s): _____

EMAIL _____ SPOUSE/GUEST NAMES _____

STREET ADDRESS _____

CITY, ST, ZIP _____ PH. NUMBER (____) _____ - _____

DISABILITY/DIETARY RESTRICTIONS _____
 (Sleeping room requirements must be conveyed by attendee directly with hotel)

MUST YOU BE LIFTED HYDRAULICALLY ONTO THE BUS WHILE SEATED IN YOUR WHEELCHAIR IN ORDER TO PARTICIPATE IN BUS TRIPS? ☐ YES ☐ NO (PLEASE NOTE THAT WE CANNOT GUARANTEE AVAILABILITY).