

Americal Division Veterans Association Reunion Registration Form

Listed below are all 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/Americal2025> (online registrations have a convenience fee of 4%). Registration form and payment must be received on or before 7/30/25. 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: Americal Division Veterans Association

OFFICE USE ONLY Check # _____
Received _____ Inputted _____

Don't forget CUT-OFF date is 7/30/25

	Price	# of Ppl	Total
MANDATORY REGISTRATION FEE			
WWII Americal Veteran plus Spouse or Escort	FREE		-----
ADVA Member	\$30		\$
Non-Member (includes one-year ADVA membership dues and benefits)	\$40		\$
Spouse and/or Guests (EACH)	\$30		\$
Total number in your party (including member, spouse, and guests)	-----		-----
TOURS			
Thursday 9/4: Memorial/MOH Museum – Members/Spouses/Guests	\$81		\$
Friday 9/5: Stockyards – Members/Spouses/Guests	\$43		\$
MEALS			
Saturday 9/6: Banquet (<i>Please select your entrée</i>)			
Sliced Flank Steak with Cabernet-Mushroom Sauce	\$70		\$
Grilled Chicken Breast with Mushroom and Herb Demi-Glace	\$67		\$
Pacific Cod, Marinated with Citrus Juices with a Lemon-Parsley Sauce	\$67		\$
Chef's Selection of Vegetarian Entree	\$67		\$
WWII Vet/Spouse and/or Escort – Banquet Dinner at No Charge – Please select entrée: <input type="checkbox"/> Beef <input type="checkbox"/> Chicken <input type="checkbox"/> Fish <input type="checkbox"/> Vegetarian	-----		-----
Total Amount Payable to Armed Forces Reunions, Inc.			----- \$

PLEASE PRINT YOUR NAME AND SPOUSE/GUEST NAMES AS YOU WISH THEM TO APPEAR ON THE NAMETAG:

FIRST _____ LAST _____ UNIT _____

YEARS WITH UNIT: 19 ____ - 19 ____ ERA WWII PANAMA VIETNAM FIRST TIME ATTENDEE? YES NO

SPOUSE / GUEST NAME(S) _____

EMAIL _____ PH. # _____

STREET ADDRESS _____

CITY, ST, ZIP _____

DISABILITY / DIETARY RESTRICTIONS _____

EMERGENCY CONTACT NAME _____ PH. # _____

DO YOU NEED TO BE HYDRAULICALLY LIFTED ONTO THE BUS IN ORDER TO PARTICIPATE IN TOURS? YES NO
(PLEASE NOTE THAT WE CANNOT GUARANTEE AVAILABILITY).

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

REGISTER ONLINE AT: <https://www.events.afr-reg.com/e/Americal2025>