



Reply Card

___ I/We will attend the following events *(please write number of attendees for each event)*:

___ Welcome Reception, Oct. 2, Hall of Fame, Westside Campus, 7 p.m.

___ Continental Breakfast, Oct. 3, President's Box, Athletic Stadium,
Westside campus, 9 a.m.

___ Lunch, President's Box, Oct. 3, Athletic Stadium, 11:30 a.m.

___ Pregame 1969 Football Team Introductions, Oct. 3, Athletic Stadium,
11 a.m.

___ Football Game, Oct. 3, President's Box, Athletic Stadium, noon

___ Reunion Dinner, Grand Ballroom, Oct. 3, Westside Campus Center,
6 p.m. Cocktail Hour, 7 p.m. Dinner

Names: _____

Enclosed is a reservation for _____ people x \$100/person, plus a tax-deductible donation of \$_____ toward the reunion memorial for a total of \$_____.

___ I am unable to attend, but would like to make a donation toward the reunion memorial in the amount of \$_____.

Preferred Payment Options:

___ Check (payable to WCSU Foundation/1969 Football Reunion)

OR ___ Visa ___ MasterCard ___ Discover

Credit Card # _____ Exp. _____

Name on Card _____

Signature _____

Mail in the envelope provided. For more information or to RSVP by phone, call (203) 837-8290.