

## 2016 USS Hector Reunion - San Antonio, Texas

September 21-25, 2016

*Please complete this form and return it with a check for full payment. To ensure your reservation for these activities, you must return this form with payment in full no later than 8-15-2016.*

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

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

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Rank/Rate: \_\_\_\_\_ Years served aboard the Hector: \_\_\_\_\_ Plank Owner:  Yes  
 No

Name of guest(s) attending reunion with you: \_\_\_\_\_

<b>Registration Fee</b> \$20/person <i>Required for each adult attending the reunion. Those under 18 yrs old are free.</i>	_____ # of adults attending	\$ _____ (total amount)
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<b>Field Trip:</b> When: Thursday, September 22 (8:30am-4pm) Where: National Museum of the Pacific War and Fredericksburg, TX  <b>Cost:</b> WWII Veterans \$20/person All others \$28/person <i>If you would like to go but do not want to tour the museum, the cost is \$20/person</i>	_____ # of WWII Veterans attending	\$ _____ (total amount)
	_____ # of non-WWII attendees	\$ _____ (total amount)
	_____ # of non-touring museum attendees	\$ _____ (total amount)

<b>7-day Trolley Bus Pass</b> Cost: \$12/person <i>(To get around Downtown easier. See Hector reunion website for more information.)</i>	_____ # of passes you would like	\$ _____ (total amount)
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<b>Banquet Dinner</b> When: Saturday, September 24 Cost: \$36/person  <i>A special meal is available for children (under 18 yrs old). Cost is \$20.</i>	<i>Dinner Choices:</i>		
	Sliced Roast Beef in Mushroom Sauce w/ Roasted Herbed Potatoes	_____ # of beef meal option	\$ _____ (total amount)
	Chicken Marsala with Wild Rice Pilaf	_____ # of chicken meal option	\$ _____ (total amount)
	Chili-lime Tortilla Crusted Tilapia Filet w/ Herbed Potatoes	_____ # of fish meal option	\$ _____ (total amount)
Kids Meal (Chicken fingers, fries & fruit cup)	_____ # of kids meal	\$ _____ (total amount)	

<b>Make checks payable to:</b> Gene Bartolaba <b>Mail payment and RSVP form to:</b> PO Box 501 Sitka, AK 99835	Total Amount: \$ _____
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<p style="text-align: center;"><b><u>In Case of Emergency Contact</u></b></p> Name: _____ Relationship: _____ Telephone Number: _____ <p style="text-align: center;"><small>(Include area code)</small></p>	<p style="text-align: center;"><b><u>SPECIAL NEEDS</u></b></p> Please list any special requirements you may have due to physical limitations, dietary restrictions, religious observances, etc
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**DON'T FORGET TO BRING A GIFT FROM YOUR AREA FOR THE BANQUET RAFFLE!**

**For additional information contact your reunion host:**  
 Mike Field ~ Ph: 210-748-5679 ~ Email: flympguy@yahoo.com