

Registration Form

SUFFOLK UNIVERSITY
ALUMNI WEEKEND
JUNE 8–9, 2012

Name _____ Degree/Year _____
Name of Guest _____
Address _____
City _____ State _____ ZIP _____
Home phone _____ Business phone _____
Email _____

Please indicate the number of participants for each event below.

FRIDAY, JUNE 8

Moakley Breakfast Series _____ x No Charge
Half-Century Club Luncheon
(50th Reunion and prior classes) _____ x No Charge
Party at the Red Hat _____ x No Charge
Class of 2007 Reunion Reception at Tia's _____ x No Charge
Pre-Concert Reception at Symphony Hall _____ x \$25 per person
Boston Pops, Floor Seats _____ x \$82 per person
Boston Pops, First Balcony Seats _____ x \$54 per person

Note: Pops tickets are limited to two per alumnus.

SATURDAY, JUNE 9

Welcome Breakfast _____ x No Charge
Back to the Classroom (choose from schedule) _____ x No Charge
___ A ___ B ___ C ___ D 10:30am–11:15am
___ A ___ B ___ C ___ D 11:30am–12:15pm
History of Suffolk Walking Tour _____ x No Charge
Reunion Reception, Dinner, and Awards Ceremony
 Members of Classes 2002–2012 _____ x \$40 per person
 All other Alumni _____ x \$65 per person

___ Enclosed is a check, payable to Suffolk University
___ Bill my credit card: ___ Mastercard ___ Visa ___ Discover ___ American Express
Card Number _____
Security Code _____ Expiration Date _____
Signature _____

Please inform us of any dietary restrictions or special needs requiring our attention.

RETURN TO:

Suffolk University | Office of Alumni Relations | 8 Ashburton Place | Boston, MA 02108
Tel: 617.305.1999 | Fax: 617.573.8711 | amueller@suffolk.edu