

NICKERSON FAMILY ASSOCIATION REUNION

September 9, 10, 11, 12, 2011

RESERVATION FORM

REGISTRATION (Registration is free for children under 16)

Child(ren)'s Name(s) & age(s): _____

NAME: _____ @ \$25: \$ _____

NAME: _____ @ \$25: \$ _____

NAME: _____ @ \$25: \$ _____

ALL registrations after August 26, 2011 _____ @ \$35: \$ _____

Indicate number of people for:

Friday – East Dennis Walking Tour _____ @ FREE

Friday – Welcome party _____ @ \$10: \$ _____

Saturday lunch _____ @ \$10: \$ _____

Saturday – Cemetery walk and/or Manse tour _____ @ FREE

Saturday – Dinner _____ @ \$40: \$ _____

(indicate number for fish _____; number for chicken _____)

Sunday – Caleb House: open hearth cooking

and Nickerson Family picnic _____ @ \$25: \$ _____

Total Enclosed: \$ _____

Your Address: _____

Town, State, Zip: _____

Phone (with area code): _____

Email: _____

Lineage (unless previously furnished): _____

Make checks payable to: **Nickerson Family Association, Inc.**

P.O. Box 296, Chatham, MA 02650-0296

OR: Register on-line with credit card: www.nickersonassoc.org