

**CAMPTI-CRESTON ALUMNI ASSOCIATION  
2016 REUNION PAYMENT FORM**

**PERSONAL/CONTACT INFORMATION:**

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Email Address \_\_\_\_\_

Class of \_\_\_\_\_ Cellphone Number \_\_\_\_\_

**PAYMENT INFORMATION:**

**Please complete as appropriate:**

Description	Amount Due	Amount Paid
2016 Reunion Registration Fee	\$25.00	
Sponsorship Registration Fee (e.g., a classmate, optional)		
Sponsorship Registration Fee (e.g., a deceased classmate's descendant, optional)		
CCAA Scholarship Contribution		
CCAA 2016 Membership Dues	\$15.00	
<b>Total</b>		