



PIEDMONT SILVER EAGLES 2024 REUNION REGISTRATION FORM

****FORM MUST BE RECEIVED BY October 1, 2024****

NAME OF MEMBER _____

Spouse, Guest or Emer. Contact Info: _____

Will you be staying at the hotel? _____ **YES** _____ **NO**

You may attend all three nights or any one or two nights

ATTENDING	COST (Based on payment by check)	TOTAL
_____	\$210.00 PER PERSON FOR 3 NIGHTS (OCT 20-22)	\$ _____
_____	\$70.00 PER PERSON SUNDAY NIGHT (OCT 20)	\$ _____
_____	\$70.00 PER PERSON MONDAY NIGHT (OCT 21)	\$ _____
_____	\$70.00 PER PERSON TUESDAY NIGHT (OCT 22)	\$ _____

*****Buffet dinner & Open Bar for all nights** **TOTAL REMITTED \$** _____

RETURNING OF FORM AND PAYMENT:

MAIL: PIEDMONT SILVER EAGLES, INC. (Make checks payable to PSE)

Attn: Rich Alter, PSE Treasurer

32 Cats Whisker Ct.

Biltmore Lakes, NC 28715

Additional Information or Request: