



ALUMNI REGISTRATION FORM

Name _____

Indicate which years you played on the team _____

Address _____

Phone _____ Email Address _____



Will you play in the alumni game Yes _____ No _____



ALUMNI GAME PARTICIPATION FEE:

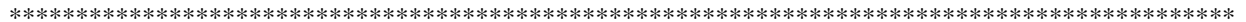
Current Booster Member	\$	0	
New Booster Member	\$	0	
(form & fee enclosed)			
Non Booster Member	\$	35	\$ _____

ALUMNI LUNCHEON

_____ # of Meals @ \$18.00/ea	\$ _____
_____ # of Children's Meals @ \$9.00/each (Ages 12-17)	\$ _____

Total Enclosed: \$ _____
(Checks payable to Icers Booster Club)

Names of your Guests:



MAIL WITH FORMS TO:
Penn State Ice Hockey Office
Attn: Alumni Weekend
123 East Area Locker Building
University Park, Pa 16802

