

SUMMER REUNION RESERVATION FORM

Mail-In Reservation Deadline: Postmark by August 2

Member Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Membership No. (from mailing label): _____ Phone: _____

Guest Name(s): _____

Entrée Selection (indicate number): _____ Chinese Chicken Salad _____ Cafe Burger _____ Salmon
_____ Turkey Wrap _____ Cheese Ravioli

Total Attending: _____ at \$35 each = \$ _____

Go on-line to www.tra-spacepark.org and make your reservations and pay using PayPal.

Or, mail with a check payable to "TRA" to the following address: TRA, P.O. Box 1276, Redondo Beach, CA 90278