

TOWNE FAMILY ASSOCIATION, INC.
39th ANNUAL MEETING & REUNION
“A CELEBRATION OF FAMILY”
AUGUST 1—4, 2019

HOTEL VENUE: Best Western Okemos/East Lansing Hotel & Suites, 2209 University Park Dr., Okemos, MI
 For Reservations call (517) 349-8700 and ask for TFA group rate \$109 per night (plus tax) by 7/10/2019

ANNUAL REUNION REGISTRATION:

No registration fee for children under the age 18, but please be sure to list their names and their relationship to member (for name tags).

EVENT SCHEDULE:

THURSDAY, AUG. 1st:

Hospitality “Stadium Room”
8am—11pm (w/workshops planned)
Reunion Registration & Social Time
TFA Board Meeting “Hamilton Board Room” 5pm—10pm

FRIDAY, AUG. 2nd:

Hotel Breakfast (complimentary)
TFA Annual Meeting “Stadium Room”
7:30am—9:45am

Field Trip: 10am—8pm
Michigan History Museum, Lansing, MI (*w/box lunch \$15pp) (**admission fees vary); and to **Frederik Meijer Gardens/Guided Tram**, Grand Rapids, MI (admission fee \$15pp); 4:30pm Dinner stop at **Blue Water Grill**, Grand Rapids, MI (attendees pay for own meal)

SATURDAY, AUG 3rd:

Hotel Breakfast (complimentary)
Hospitality “ Okemos Ballroom”
Open all day 10am—11pm

Field Trip: 8am—5pm
Henry Ford Museum, Dearborn, MI (**admission fees vary); lunch on your own, on-site.

Annual Banquet “Okemos Ballroom”
6pm—10pm (w/dinner speaker; raffle/silent auction and sales items)

SUNDAY, AUG 4th:

Farewell and safe travels!

REGISTRATION (DEADLINE JULY 15, 2019)

<u>Registration Fee:</u>	<u>Number Persons:</u>	<u>Total Cost:</u>
\$ 40.00 per Member	_____	\$ _____
\$ 65.00 per Non-member	_____	\$ _____
Number of children (<18)	_____	<u>no charge</u>
(A) TOTAL REGISTRATION FEES:		\$ _____

Attendee Names (address and contact info):

DINNER BANQUET: “Traditional Buffet” with Beef Tips w/Rice; Chicken Kiev; Vegetable Lasagna (each meal includes: red potatoes w/herbs, green beans w/almonds; tossed garden salad; rolls and butter; Assorted Cakes (Chocolate, White, Banana, Lemon), and beverages (coffee, tea, soft drinks. No bar service.) Complimentary wines at each table. Please note Food Allergies: _____

\$ 40.00 per person	_____	\$ _____
\$ 25.00 per child (<18)	_____	\$ _____
(B) TOTAL DINNER BANQUET FEES:		\$ _____

2-DAYS FIELD TRIPS: (*Friday box lunch included below, review and mark selections on back of this form) (**Admission fees to tour venues vary and are listed separately, please review and mark selections on back of this form.)

\$ 50.00 coach per person (*Fri)	_____	\$ _____
\$ 35.00 coach per person (Sat)	_____	\$ _____
(C) TOTAL COACH FEES:		\$ _____

(CONTINUED ON NEXT PAGE)

FRI., AUG. 2nd Field Trip - Honey Baked Ham Company BOX LUNCHESES (\$15 per person is included in the coach fee, and includes delivery and tip). A BOX LUNCH MENU FORM is shown on the next page (page 3 of 3). Please duplicate and complete one form per person you've shown as registered on page 1 for this field trip. Box Lunches will be labelled with each name and distributed on the coach.

(Note: the # of Box Lunch Order sheets should equal the number of persons entered for the Friday Field Trip Coach on page 1.)

FIELD TRIP ADMISSION FEES: (check all age categories that apply for each of the persons included on this registration form)

Fri., Aug 2nd:

Michigan History Museum: Adult (18+) \$6 x ____ = \$ ____; Senior (65+) \$4 x ____ = \$ ____; Youth (6-17) \$2 x ____ = \$ ____; Child (1-5) Free x ____ (add all that apply) = Total \$ ____

Frederik Meijer Gardens/Guided Tram: \$15 pp x ____ = Total \$ ____

Sat., Aug 3rd: Henry Ford Museum: Adult (12+) \$24 x ____ = \$ ____; Senior (62+) \$22 x ____ = \$ ____; Youth (5-11) \$18 x ____ = \$ ____ Child (1-4) Free x ____ (add all that apply) = Total \$ ____

(D) TOTAL ADMISSION FEES: \$ ____

TOTAL ALL REUNION FEES FOR:

A) REGISTRATION \$ ____

B) BANQUET \$ ____

(C) COACH \$ ____

(D) ADMISSIONS \$ ____

GRAND TOTAL ALL FEES = \$ ____ (due and payable with completed forms)

MEMBER NAME: _____

I AM A DESCENDANT OF: REBECCA ____; EDMUND ____; JACOB ____; JOSEPH ____; MARY ____; SARAH ____.

(CONTINUED ON NEXT PAGE)

Please Mail your completed Registration Forms with your check payable to — TFA, INC. to:

Gail Garda, 34 Old Stage Rd., Hampton Falls, NH 03844-2021

BOXED LUNCH MENU - COMPLETE ONE FORM PER PERSON

PLEASE DUPLICATE THIS FORM, AND RETURN ALL COMPLETED COPIES WITH YOUR REUNION REGISTRATION FORM FOR EACH PERSON YOU ARE REGISTERING FOR THE FRIDAY FIELD TRIP.

All box lunches include your choice of a Sandwich, Side Item, Baked Cookie and Beverage.

PLEASE MARK YOUR INDIVIDUAL SELECTION IN EACH CATEGORY:

SANDWICHES: (Please Note alternate dressings, bread and cheese selections below, and cross out any toppings you **DO NOT** want on your sandwich)

___ HCC—HAM CLASSIC (ham, swiss cheese, lettuce, tomato, mayo and Hickory honey mustard on a flaky croissant)

___ TCL—TURKEY CLASSIC (roasted turkey, swiss cheese, lettuce, tomato, mayo, Hickory honey mustard on a baker’s roll)

___ RB—ROAST BEEF & CHEDDAR (roast beef, cheddar cheese, lettuce, tomato, zesty horseradish sauce, red onions, and spicy mustard on a flaky croissant)

___ VEG—MEDITERRANEAN VEGGIE (sliced cucumber, green peppers, provolone cheese, lettuce, tomato, black olives, banana peppers, ranch dressing and a balsamic vinaigrette on multigrain flat bread)

Alternate Dressings Selection: 1000 Island ___; Italian ___; French ___; Fat Free Ranch ___; or, Caesar ___.

Alternate Bread selection: Croissant ___; Bakers Roll ___; White ___; Marble Rye ___; Multigrain ___; Ciabatta ___; Flat Bread ___.

Alternate Cheese selection: Swiss ___; Cheddar ___; Provolone ___; NO CHEESE___.

SIDES: Potato Salad ___; Pasta Salad ___; BBQ Chips ___; Chips ___; Pretzels ___.

COOKIES: Chocolate Chip ___; Oatmeal Raisin Nut ___; Heath Crunch ___; Peanut Butter ___.

BEVERAGES: Diet Coke ___; Water ___; Root Beer ___; Sprite ___; Coke ___; Cherry Coke ___(Diet___ &/or Caffeine Free ___).

NAME: _____ Email or Phone #: _____

COMMENTS _____