



# ALUMNI COUNCIL REGISTRATION FORM

*September 11-13, 2009*

**Please complete all information and return this form by Friday, August 14, even if you cannot attend the weekend. Thank you!**

Name \_\_\_\_\_ Class \_\_\_\_\_  
 (first) (last) (name while at Oberlin)

Home Address \_\_\_\_\_ Employer \_\_\_\_\_

City \_\_\_\_\_ Title \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Work Address \_\_\_\_\_

Home Phone(\_\_\_\_) \_\_\_\_\_ Cell Phone(\_\_\_\_) \_\_\_\_\_ City \_\_\_\_\_

Home Fax(\_\_\_\_) \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home E-mail \_\_\_\_\_ Work Phone(\_\_\_\_) \_\_\_\_\_ Work Fax(\_\_\_\_) \_\_\_\_\_

Work E-mail \_\_\_\_\_

I plan to attend the council weekend:  YES  NO

**Please fill out above information and return this form to the Alumni Office even if you cannot attend.**

I am an experienced member who is willing to serve as a Council Mentor:  YES  NO

I am a newer volunteer and would like to have a Council Mentor assigned to me:  YES  NO

I'm willing to be contacted by Oberlin students for career advice:  YES  NO

**I am a(n) (check all that apply):**

- Admissions Coordinator       Conservatory Cluster Agent       Class President
- Executive Board Member       Regional Coordinator       Reunion Planner
- Gift Committee Member       Career Services Liaison       Class Agent
- Alumni-Elected Trustee       Alumni Assoc. Past President

**Alumni Council Committee Member:**

- Admissions Advisory       Career Services       Conservatory       Nominations
- Awards       Communications       Development       Trustee Search

**Affiliate Group Representative:**

- OAAAA       OAPAAA       OCAA       OCABA
- OCUPAA       OLA       E (EnviroAlums)

**Other Groups:**

- Heisman Club Board Member

**(OVER, PLEASE)**

OFFICE USE ONLY:  
ID# \_\_\_\_\_ NAME \_\_\_\_\_ LAST \_\_\_\_\_ FIRST \_\_\_\_\_

FOR OFFICE USE ONLY

_____ Entered	_____ Information Checked	_____ Confirmed	_____ Participant List
_____ Name Tag	_____ Folder Label	_____ Development Office	_____ Admissions Office

NAME \_\_\_\_\_

CLASS YEAR \_\_\_\_\_

**ROOM ACCOMMODATIONS: Please reserve a room at the Oberlin Inn for:**

Thursday, Sept. 10                       Friday, Sept. 11                       Saturday, Sept. 12                       Sunday, Sept. 13

SMOKING                       NON-SMOKING (This special request is not guaranteed and will be honored depending on availability at check-in)

I will share a room with another Council member (**separate beds**): \_\_\_\_\_  
(if no name indicated, you will be assigned a roommate)

I will bring my spouse/partner (**King bed only**)

I do not need a room reservation. **Please return this form even if you have made other housing arrangements or live nearby.**

No room payment is necessary at this time. **Plan to pay your room bill when you check out and include it when you list your expenses on your Statement of Expenses form.** A credit card # is required to guarantee your room.

Type of Credit Card \_\_\_\_\_ CC# \_\_\_\_\_

Expiration Date \_\_\_\_\_ Signature Panel Code \_\_\_\_\_ (3 digit number on the back of your card following, the last 4 digits of your account number).

Upon receipt of your registration form, the Alumni Office will send you an email or a confirmation letter. **As usual there will be too few rooms at the Oberlin Inn to meet our complete needs, especially single rooms.** All reservations will be handled on a first-come, first-served basis. We appreciate your understanding and cooperation. Enclosed is an area motel and B & B list should you chose to stay off campus. Since there is no public transportation to and from the motels to Oberlin, a rental car may be necessary.

**MEALS/TICKETS**

**Please indicate the meals and tickets needed, including those for spouses/partners who are attending.**

<input type="checkbox"/> Thursday Reunion Planning Lunch (Class of 1960) # _____	<input type="checkbox"/> Saturday Reunion Planning Luncheon (Class of 1985) # _____
<input type="checkbox"/> Friday Reunion Gift Planning Breakfast (Class of 1960) # _____	<input type="checkbox"/> Saturday Alumni-Student Exchange Networking Picnic # _____
<input type="checkbox"/> Friday Breakfast for New Executive Board Members # _____	<input type="checkbox"/> Saturday Reunion Planning Dinner (Classes of 1999, 2000, 2001) # _____
<input type="checkbox"/> Friday Lunch - Orientation for New Council Members # _____	<input type="checkbox"/> Saturday Reunion Planning Dinner (Classes of 1949, 1950, 1951) # _____
<input type="checkbox"/> Friday Council Dinner (everyone) # _____	<input type="checkbox"/> Sunday Breakfast Buffet (everyone) # _____
<input type="checkbox"/> Saturday Breakfast Buffet (Exec Board) # _____	<input type="checkbox"/> Sunday Luncheon (current, new, and retiring Executive Board Members) # _____
<input type="checkbox"/> Saturday Breakfast Buffet (everyone) # _____	<input type="checkbox"/> Tickets for 2 p.m. Litoff Building Tour (limited to 30 people on tour) # _____
<input type="checkbox"/> Saturday Luncheon (MRC Affiliate Groups) # _____	<input type="checkbox"/> Tickets for 3 p.m. Litoff Building Tour (limited to 30 people on tour) # _____
<input type="checkbox"/> Saturday Reunion Planning Luncheon (Classes of 1979, 1980, 1981) # _____	<input type="checkbox"/> Tickets for Convocation with Ed Helms '96 (limit two per person) # _____
<input type="checkbox"/> Saturday Reunion Planning Luncheon (Classes of 1964, 1965, 1966) # _____	
# _____	

**Please indicate whether you need a vegetarian/vegan meal  and the # \_\_\_\_\_ You can only receive a vegetarian/vegan meal if you present the server with a special ticket.**

**Please indicate whether you will need Internet access while on campus: \_\_\_ YES \_\_\_ NO**

Send or FAX this form to the Alumni Office, 50 W Lorain St, Oberlin, OH 44074; Fax: 440.775.6748 by **Friday, August 14, 2009**. If you have questions, call the Alumni Office, 800.693.3167, ext 1 or email Kim.Kosonovich@oberlin.edu.