It's important that we determine how many of you plan to participate in **any** or **all** of the scheduled activities.\* This survey is for planning purposes only and does not obligate you to participate.

I plan to participate in the following scheduled events:	No. in party
<ul> <li>Friday bus tour of Detroit landmarks</li> <li>Not included in registration. Price to be determined</li> </ul>	
<ul> <li>Friday reception and self-tour at the Detroit Institute of A Museum admission charges apply.</li> </ul>	rts
<ul> <li>Saturday morning Plenary session(s)</li> <li>To be led by faculty and distinguished alumnae. Cost included in</li> </ul>	registration.
<ul> <li>Saturday luncheon/faculty panel discussion Cost included in registration.</li> </ul>	
<ul> <li>Saturday afternoon break-out session(s)</li> <li>To be led by Monteith alumnae. Cost included in registration.</li> </ul>	
<ul> <li>Saturday evening dinner-dance Cost included in registration.</li> </ul>	
<ul> <li>Sunday brunch at hotel</li> <li>Not included in registration. Menu pricing.</li> </ul>	
<ul> <li>Sunday walking tour(s) conducted by Preservation Wayne Not included in registration. \$10/per person.</li> </ul>	
<ul> <li>Sunday walking tour of WSU campus</li> <li>Cost included in registration.</li> </ul>	
*Details for each of these events will be posted on this site at a later	date.
Please indicate your interest in hotel accommodations:  O I expect to need hotel accommodations (Click to request in	formation via email)
⊙ I do not expect to need a hotel.	
Please indicate your interest in the following items avail	able for purchase
<ul><li>⊙ Commemorative T-shirt</li></ul>	
<ul><li>⊙ Commemorative polo shirt</li></ul>	
⊙ Reunion memorabilia (e.g.: mug. framed photos, commer	morative booklet)
Your first name Last Name	
Guest's first name Last Name	
Your last name while attending Monteith (if different from above)	
Phone Email Year of graduat	ion N/A O

City

Address

State \_\_\_\_