

2017 Graduation RSVP Form

Name of Graduate: _____

Phone #: _____ Email Address: _____

Awards Party

- I will attend the Awards Party on Wednesday, May 10
 - I will NOT attend the Awards Party on Wednesday, May 10.
-

Child Care

I will need child care during the Commencement Ceremony. Child care will be for children five (5) years of age and under.

Number of Children _____ Ages of Children _____

Handicapped Parking for Guests

Number of my guests that have a DMV issued handicapped parking tag and will need handicapped parking. _____.

Please return this card by Friday, April 28.

Contact Bill LeCato at 789-1797 (Room A38), if you have questions.