

2023 Reunion Registration Form

USS Charles S. Sperry DD 697 Association /
Sheraton Albuquerque Airport Hotel
2910 Yale Blvd SE, Albuquerque, NM 87106
May 7 - 11, 2023

DEADLINE FOR HOTEL REGISTRATION IS: April 7, 2023

Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Date of arrival: _____ FIRST TIMER: Y _____ N _____

E-mail address: _____ **Confirmation of receipt will be emailed back to you**

<u>No. Persons</u>	<u>Unit Cost</u>	<u>Total</u>
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Reunion Hospitality Room

_____ Sunday May 7th Pizza Party Hospitality Room **Fee waived, but must register!**

Trip to Santa Fe

_____ Monday May 8th (includes Transportation, tour guide, admission, & tax)
Does Not include Meal Cost or Bus Gratuity **Fee waived, but must register!**

Explore Albuquerque

_____ Tuesday, May 9th (includes Transportation, tour guide & tax)
Does Not Include Meal Cost or Bus Gratuity **Fee waived, but must register!**

Banquet Meal Choice Wednesday, May 10th:

_____ Roasted Prime Rib with Rosemary au jus, creamy sauce X \$42 = \$ _____

Name(s) _____/_____/_____

_____ Pan Seared Salmon in a caper dill cream sauce X \$42 = \$ _____

Name(s) _____/_____/_____

_____ Herb Marinated and Grilled Breast of Chicken in chef's choice sauce X \$42 = \$ _____

Name(s) _____/_____/_____

Banquet Meal includes salad, rolls, starch and vegetable. Cash bar for the Banquet.

_____ **Wheelchair Rental for entire reunion. Width sizes available are: 16" 18" 20" 22" 24"**
Please circle the size needed. Fee waived, but must register!

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Membership Dues: \$ _____

Grand Total \$ _____

MEMBERSHIP APPLICATION
USS CHARLES S. SPERRY (DD697) ASSOCIATION

Application for the following category (*) of membership (**check one**):

Initial Membership () **Membership Renewal** () **Associate Membership** () **Widow** () **Lifetime Membership** ()

If Associate Member, please enter the name of Sperry Relative: _____

DATE OF APPLICATION: ____/____/____ **FOR CALENDAR YEAR** _____

NAME _____

SPOUSE'S NAME _____

ADDRESS _____

CITY _____ **ST** _____ **ZIP** _____

TELEPHONE _____ **CELL PHONE** _____

EMAIL ADDRESS _____

DATES SERVED ABOARD: FROM _____ **TO** _____

ENLISTED RATE (MM2; BMSN; ETN3; EN; SN): _____ **OFFICER RANK:** _____ **DIVISION:** _____ **DEPT:** _____

DUES ARE PER CALENDAR YEAR AND MAY BE PAID BY PERSONAL CHECK OR MONEY ORDER. **MAKE CHECKS PAYABLE TO: USS CHARLES S. SPERRY (DD 697) ASSOCIATION.**

MAIL PAYMENT WITH APPLICATION TO:
USS CHARLES S. SPERRY (DD 697) ASSOC.
% RON LaPLACA, TREASURER
25196 ZODIAC LANE
PUNTA GORDA, FL 33983 Phone: 516-380-3327

DUES & CATEGORIES OF MEMBERSHIP :

Initial Membership: \$10.00 (This is for former Sperry crew joining the association for the first time.)

Membership Renewal: \$10.00 / year (Please use annual renewal form to update contact information,)

Associate Membership: This is for relatives of current or former members, **\$10.00 / year**. (Sperry officers to verify relationships.) (Please use annual renewal form to update contact information,)

Lifetime Membership: Dues for Lifetime membership is a onetime payment of **\$100.00** (Please use annual renewal form to update contact information,)

Widow Associate: There are **no dues required** for this membership type. (Please use annual renewal form to update contact information,)

FOR OFFICE USE ONLY:

M/SHIP CARD: _____
DUES: _____
TREAS. SS: _____
M/SHIP SS: _____
COMPUTER: _____
ROSTER: _____
EMAIL: _____