

Capitol Hill High School Alumni
Hall of Fame Association Annual Banquet
August 17, 2025

RESERVATION FORM

YOUR CONTACT INFORMATION

(Please Print)

CHHS Alumni Name: _____ CHHS Class of _____
(Last Name) (First Name) (Maiden Name)

Spouse/Guest Name: _____ CHHS Class of _____
(Last Name) (First Name) (Maiden Name)

Cell # _____ Home # _____

E-mail: _____

For Caterer: I **WILL** attend _____ I **WILL NOT** attend _____

RESERVATION AND DONATION

DINNER: \$50.00 per person

Number of people who are attending banquet
(Include yourself): _____ x \$50.00 = \$ _____

Special Contribution Toward CHHS Needs \$ _____
Students/Faculty/Classroom Projects

TOTAL MONIES SENT: \$ _____

PLEASE COMPLETE AND RETURN RESERVATION FORM BY AUGUST 7, 2025

Please make checks payable to: CHHS Alumni Hall of Fame Association
Mail to: P. O. Box 850958
Yukon, OK 73085

See page 2 (reverse side) for additional information.

TABLE RESERVATIONS

- If you want to reserve a table for your group, **PLEASE PRINT** each name below. Tables seat 8 people. Please contact the people on your list to be sure they are attending.

1 _____ 2 _____

3 _____ 4 _____

5 _____ 6 _____

7 _____ 8 _____

- If you reserve more than one table, please print each name at the bottom of this form.
- If you have a special request for seating location, food restrictions, wheelchair needs, etc. please include this information.

QUESTIONS?

- If you have questions about table reservations, EMAIL: CHHSALUMNIOKC@GMAIL.COM