

# Registration

\_\_\_\_\_  
Main guest name (last, first)

Notes

## A. Events

**Golden Bear Luncheon and 50<sup>th</sup> Reunion (GB)** ..... at \$75 = \_\_\_\_\_  
 Valet Parking ..... at \$25 = \_\_\_\_\_

\_\_\_\_\_  
Seating request

**Oski Wow Wow (OWW)**  
 Adults/Cal students/children (5-17)..... at \$35 = \_\_\_\_\_

\_\_\_\_\_  
Seating request

**Bear Affair Tailgate BBQ (BA)**  
 Adults..... at \$45 = \_\_\_\_\_  
 Cal students/children (5-17)..... at \$35 = \_\_\_\_\_

\_\_\_\_\_  
Seating request

**Class Pass (CP)**  
 Includes all campus tours, open houses, lectures, and all of the amenities offered at Homecoming Headquarters. If you are attending any of the events above, do not select this option.  
 Adults/children (5-17)..... at \$35 = \_\_\_\_\_  
 Cal students..... at FREE = \_\_\_\_\_

**Subtotal** \_\_\_\_\_

Visit [fevo.me/calhomecoming23](https://fevo.me/calhomecoming23) for discounted tickets to the Homecoming game.

## B. Other Options

**Homecoming blanket (pickup)** ..... at \$15 = \_\_\_\_\_  
**Homecoming blanket (shipped)** ..... at \$25 = \_\_\_\_\_  
**Grill and chill cooler bag and mini bean bag toss game (shipped)** ..... at \$90 = \_\_\_\_\_

**Make a gift:** You can maintain Berkeley's excellence and help our students and faculty soar by supporting your favorite school or program with a gift.

\$ \_\_\_\_\_ Please direct this gift to \_\_\_\_\_

## C. Guest Names

Visit [homecoming.berkeley.edu](https://homecoming.berkeley.edu) to see who else is attending!

**Main guest info** Check here if guests do not want their names to appear in the list of attendees.

**1**

first	maiden	last	class year
<input type="checkbox"/> alum	<input type="checkbox"/> spouse/partner	<input type="checkbox"/> Cal parent/family	<input type="checkbox"/> Cal student
<input type="checkbox"/> faculty	<input type="checkbox"/> staff	<input type="checkbox"/> friend	
<input type="checkbox"/> child (age _____)	<input type="checkbox"/> GB	<input type="checkbox"/> OWW	<input type="checkbox"/> BA
			<input type="checkbox"/> CP

\_\_\_\_\_  
Meal choice / Dietary / Special accommodations / Seating request

**2**

first	maiden	last	class year
<input type="checkbox"/> alum	<input type="checkbox"/> spouse/partner	<input type="checkbox"/> Cal parent/family	<input type="checkbox"/> Cal student
<input type="checkbox"/> faculty	<input type="checkbox"/> staff	<input type="checkbox"/> friend	
<input type="checkbox"/> child (age _____)	<input type="checkbox"/> GB	<input type="checkbox"/> OWW	<input type="checkbox"/> BA
			<input type="checkbox"/> CP

\_\_\_\_\_  
Meal choice / Dietary / Special accommodations / Seating request

**C. Guest Names (cont.)**

**3**

first	maiden	last	class year
<input type="checkbox"/> alum	<input type="checkbox"/> spouse/partner	<input type="checkbox"/> Cal parent/family	<input type="checkbox"/> Cal student
<input type="checkbox"/> faculty	<input type="checkbox"/> staff	<input type="checkbox"/> friend	
<input type="checkbox"/> child (age _____)	<input type="checkbox"/> GB	<input type="checkbox"/> OWW	<input type="checkbox"/> BA
			<input type="checkbox"/> CP

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Meal choice / Dietary / Special accommodations / Seating request

**4**

first	maiden	last	class year
<input type="checkbox"/> alum	<input type="checkbox"/> spouse/partner	<input type="checkbox"/> Cal parent/family	<input type="checkbox"/> Cal student
<input type="checkbox"/> faculty	<input type="checkbox"/> staff	<input type="checkbox"/> friend	
<input type="checkbox"/> child (age _____)	<input type="checkbox"/> GB	<input type="checkbox"/> OWW	<input type="checkbox"/> BA
			<input type="checkbox"/> CP

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Meal choice / Dietary / Special accommodations / Seating request

**5**

first	maiden	last	class year
<input type="checkbox"/> alum	<input type="checkbox"/> spouse/partner	<input type="checkbox"/> Cal parent/family	<input type="checkbox"/> Cal student
<input type="checkbox"/> faculty	<input type="checkbox"/> staff	<input type="checkbox"/> friend	
<input type="checkbox"/> child (age _____)	<input type="checkbox"/> GB	<input type="checkbox"/> OWW	<input type="checkbox"/> BA
			<input type="checkbox"/> CP

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Meal choice / Dietary / Special accommodations / Seating request

**6**

first	maiden	last	class year
<input type="checkbox"/> alum	<input type="checkbox"/> spouse/partner	<input type="checkbox"/> Cal parent/family	<input type="checkbox"/> Cal student
<input type="checkbox"/> faculty	<input type="checkbox"/> staff	<input type="checkbox"/> friend	
<input type="checkbox"/> child (age _____)	<input type="checkbox"/> GB	<input type="checkbox"/> OWW	<input type="checkbox"/> BA
			<input type="checkbox"/> CP

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Meal choice / Dietary / Special accommodations / Seating request

**D. Payment Info**

Please make checks payable to UC Regents.

Check # \_\_\_\_\_ is enclosed for \$ \_\_\_\_\_

Charge my credit card for the amount of \$ \_\_\_\_\_

American Express     MasterCard     Visa

Account number \_\_\_\_\_ CID# \_\_\_\_\_ Expiration date \_\_\_\_\_

Name on card (please print) \_\_\_\_\_

Authorized signature \_\_\_\_\_

**Billing Address**

Name \_\_\_\_\_

Email (for automatic confirmation) \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Preferred phone \_\_\_\_\_

<b>Subtotals</b>
<b>A.</b> Events..... _____
<b>B.</b> Other Options..... _____
<b>Total</b> _____