

# KDHS 90<sup>th</sup> REUNION REGISTRATION

Name (maiden name if applicable): \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_

Prov/State: \_\_\_\_\_ Postal Code/Zip \_\_\_\_\_ Email: \_\_\_\_\_

Year Entered Gr. 9: \_\_\_\_\_ Number of Guests (including yourself): \_\_\_\_\_

Additional Guest 1: \_\_\_\_\_ KDHS Alumni

Additional Guest 2: \_\_\_\_\_ KDHS Alumni

## REGISTRATION FEE \$100/PERSON. INCLUDES:

- Welcome Bag
- Friday Evening Meet & Greet - Light Refreshments + Cash Bar
  - All Events & Activities
  - Saturday BBQ Lunch
- Saturday Evening Entertainment at Kapuskasing Sports Palace
- Sunday Morning Farewell Brunch at Kapuskasing Sports Palace

Total number of registrants (including yourself) \_\_\_\_\_

**\*\*PLEASE NOTE: ONLY THOSE WHO HAVE FULLY REGISTERED, INCLUDING PAYMENT BY MAY 23, WILL BE INCLUDED IN THE FAREWELL BRUNCH ON SUNDAY, JULY 5, 2026.\*\***

## TO REGISTER:

Indicate Method Of Payment:      Cheque/Money Order      E-Transfer

Mail: Print and fill it out the form & mail along with a cheque or money order to:

KDHS 90<sup>th</sup> Reunion  
C/O 15 Stewart Avenue  
Kapuskasing, ON  
P5N 1R9

OR

E-transfer: [kdhs90reunion@outlook.com](mailto:kdhs90reunion@outlook.com) Password: 4everkolts  
(please include your name and # of guests in e-transfer note/memo)

**\*\*PLEASE MAKE CHEQUES & MONEY ORDERS PAYABLE TO KDHS 90<sup>TH</sup> REUNION\*\***