

# 1959-69 ISU Football Team Reunion Questionnaire

## PERSONAL INFORMATION

Last Name		First Name	
Spouse's First Name	Email Address		
Home Phone #		Cell Phone #	
Address			
City		State	Zip Code

## TEAM INFORMATION

Position(s) Played	Jersey #	Year(s) Played (Example: 1964-65)
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I will be attending the >59 ->69 football team reunion?

YES     Sorry, but I cannot attend (Please return without filling out the below section)

Will you be bringing a spouse and/or other family members?

YES     NO    How many?: \_\_\_\_\_

Would you be interested in a Campus Bus Tour?

YES     NO    How many in your party will take the tour?: \_\_\_\_\_

Will you be attending the Social on Friday evening?

YES     NO    How many in your party will be attending the social event?: \_\_\_\_\_

Will you be attending the Tailgate before the game on Saturday?

YES     NO    How many in your party will be attending the tailgate?: \_\_\_\_\_

Will you be attending the football game?

How many game tickets will you need? \_\_\_\_\_

Would you be interested in a specially designed t-shirt? (Please indicate how many of each size)

YES     NO

SM: \_\_\_\_\_    MED: \_\_\_\_\_    LG: \_\_\_\_\_    XL: \_\_\_\_\_    XXL: \_\_\_\_\_    XXXL: \_\_\_\_\_