

THE JONES FAMILY REUNION ENROLLMENT FORM

Name _____
(first) (middle) (last)

Email Address _____

(Please circle one below)

Belonging to: John Pat Jones Willis E. Jones Walter Jones

Family Participating

	NAME	ADDRESS	AGE	AMT	YOUTH SIZE	ADULT SIZE
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

2-3 \$15.00
 4-12 \$30.00
 13-over \$60.00

T-Shirts – Youth – S, M, L
 T-Shirts – Adult – S, M, L,
 1x, 2x, 3x

Complete forms and mail with check to:

The Jones Family Reunion Committee
 P. O. Box 713
 Winton, NC 27986