

**2018 SWOSU Homecoming – Pharmacy Activities**  
**50-Year Pharmacy Class Reservation Form**

Grad Year \_\_\_\_\_

Full Name \_\_\_\_\_ Preferred Name \_\_\_\_\_

Preferred Mailing Address \_\_\_\_\_

City/State/ZIP \_\_\_\_\_

Preferred Email Address \_\_\_\_\_ Primary Phone # \_\_\_\_\_ Secondary Phone # \_\_\_\_\_

I will be attending the Class of 1968 Reception & Dinner on Friday (Coordinated by Members of Class of 1968). There will be # \_\_\_\_\_ in my party. Name(s): \_\_\_\_\_

I will be joining you for the complimentary Breakfast on Saturday (Hosted by Pharmacy Alumni Association). There will be # \_\_\_\_\_ in my party.

I will be attending the Pharmacy Alumni Recognition Ceremony on Saturday. There will be # \_\_\_\_\_ in my party. Name(s): \_\_\_\_\_

I will be attending the College of Pharmacy Open House on Saturday. There will be # \_\_\_\_\_ in my party.

I will NOT be attending any of the pharmacy activities.

**Please Submit Pharmacy Homecoming Information by October 18, 2018**

I know you don't expect it, but I would like to make a tax-deductible donation to offset the cost of this year's Pharmacy Homecoming events in the amount of \$ \_\_\_\_\_.

I would like to make a tax-deductible donation to the 50-Year Pharmacy Class Endowed Scholarship Fund (established in 2016) in the amount of \$ \_\_\_\_\_.

And/or I would like to make a tax-deductible gift to the Pharmacy Foundation in the amount of \$ \_\_\_\_\_ for  Unrestricted Use  Other, please specify \_\_\_\_\_

**Optional** Donation for Pharmacy Homecoming Events \$ \_\_\_\_\_ **Optional** Donation for Pharmacy Foundation \$ \_\_\_\_\_ **Total** Donation \$ \_\_\_\_\_

Check (Enclosed, Payable to Southwestern Pharmacy Alumni Foundation)

Visa  MasterCard  Discover Credit Card # \_\_\_\_\_ Exp Date \_\_\_\_\_

**Submit Pharmacy Homecoming Reservation information and/or Pharmacy donation with this form**

**to SW Pharmacy, P.O. Box 702, Weatherford, OK, 73096**

**or fax it to 580-774-3243 or email information to [swpharmacy@swosu.edu](mailto:swpharmacy@swosu.edu)**

**or call the Pharmacy Alumni Office (580-774-7197).**