

Please keep top form for your records as receipt and reminder and return lower portion by April 4 to: Alumni Association, Rensselaer High School, 25 Van Rensselaer Dr. Rensselaer NY 12144. If you have questions, please contact alumni@rensselaercity@gmail.com



RENSSELAER ALUMNI HALL OF FAME INDUCTION DINNER
SATURDAY, APRIL 26th, 2025 ~ 5:00PM - 9:00PM ~ Franklin Terrace Ballroom
126 Campbell Ave, Troy, NY 12180 (518) 274-3421
The facility includes ample parking and is handicapped accessible.



If you are an inductee or nominator of a posthumous inductee, you are our guest and do not have to pay, but please include your RSVP below. Please include the name for each member of your party (there is no limit). **No refunds will be given, once a reservation has been received.** Please include any dietary restrictions with your reservation. We will try our best to sit all members of your party together.

Buffet Dinner: \$65 per person Reservation prices include the cocktail hour (cash bar) with hors d'oeuvres followed by dinner. The buffet dinner includes a carving station of Roast Top Round of Beef, Chicken Marsala, Filet of Sole with crabmeat stuffing, Rigatoni with Vodka Cream Sauce, Salad, and a dessert bar

Total # of reservation(s): _____. A check in the amount of \$_____ made out to **Alumni Association of the Rensselaer NY School District** is enclosed. Below is the name for each person in my party:

Inductee: _____ Name: _____

Name: _____ Name: _____

******Tear Here and Return the bottom half with payment to Alumni Association******

Reservation Form

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Nominator of Posthumous inductee or

Inductee: _____ @ \$ **FREE**

Paid dinners:

Name: _____ Name: _____

Name: _____ Name: _____

Name: _____ Name: _____

Name: _____ Name: _____

**Dietary Concerns: _____

I may be reached at: email address: _____ or phone # _____.

Include any additional reservations as needed on the back of this form. There is no limit to the # of reservations and we encourage you to share this event with your family and friends.