**ECU Alumni Reunion Booking Form**

**Contact details**

|  |  |  |  |
| --- | --- | --- | --- |
| **Date** |  | **Phone** |  |
| **Name** |  | **Email** |  |
| **Student Number** |  | **Faculty/School** |  |

**Reunion information**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Event Name** | |  | | | |
| **Description** | |  | | | |
|  | |
| **Date** |  | | **Time** |  |
| **Venue** |  | | **Dress Code** |  |
| **Format** |  | | **RSVP Date** |  |

**Alumni target group**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Faculty** |  | | | | | |
| **School** |  | | | | | |
| **Degree** |  | | | | | |
| **Degree Level** | **Undergraduate**  **Post Grad**  **Masters**  **Doctorate** | | | | | |
| **Grad Year (s)** |  | | **Age** |  | **Gender** |  |
| **Location:** | **Domestic  International** | | | | | |
| **City / State / Country** | |  | | | | |
|  | | | | | | |
| **If your send requires more specific targeting, please specify below:** | | | | | | |
|  | | | | | | |

**Email details**

|  |  |
| --- | --- |
| **Subject line** |  |
| **Copy (Unformatted, 300 word maximum)** | |
|  | |

**Please note:**

* Booking forms are to be submitted at least 2 months prior to the event.
* Event invitations are sent four weeks prior to the event.
* Event registrations will be managed by the ECU Office of Alumni Relations.
* Attachments are sent in PDF format.

***Please submit your completed booking form to*** [***alumni@ecu.edu.au***](mailto:alumni@ecu.edu.au)