Alumni Day registration closes on Wednesday, May 23. Mail this form with your check, payable to *Harvard Medical School,* to the HMS Office of Alumni Affairs and Development, 401 Park Drive, Suite 505, Boston, MA 02215. To register online, visit hms.harvard.edu/alumni-day to access the secure link (HarvardKey required).

Questions? Contact the Alumni Engagement team at 617-384-8520 or by email at hmsalum@hms.harvard.edu.

ALUMNI DAY REGISTRATION FORM

First Name or Nickname *(to appear on nametag)*: _____

Last Name *(to appear on nametag)*: _____

Last Name at Graduation *(if different than above)*: _____

Phone Number *(circle one: home/cell)*: _____

Email Address: _____

Home City: _____ **Home State:** _____

HMS Degree Year: _____

Guest First and Last Name *(to appear on nametag)*: _____

If your guest is an HMS graduate, please indicate their class year: _____
If you have more than one guest, please list them on the last page.

☐ **Please check here if you have an ADA-administered accessible parking permit and require a designated parking space on campus**

Please indicate any dietary restrictions for you and your guest(s).
Requests will be applied to all Alumni Day events. Please note name next to the restriction.

☐ Vegetarian ☐ Gluten-Free
☐ Vegan ☐ Dairy-Free
☐ Pescatarian ☐ Nut Allergy
☐ Kosher

FRIDAY, JUNE 1:	# Attending	x Fee	= Total
Registration Fee for all Daytime Activities		$25 *per person*	$
All-day Parking New Research Building garage 77 Avenue Louis Pasteur Advance registration is required.	*# of cars*	*$15* *per day*	$
8:30–9:30 a.m. **Continental Breakfast**		*Covered by reg. fee*	
9:30–10 a.m. **Annual Business Meeting** *Harvard Medical Alumni Association*			
10:15–11:45 a.m. **Alumni Day Symposium** *Advances in Medicine: It Takes a Biomedical Village*			
Noon–12:30 p.m. **State of the School Address** Dean George Q. Daley, AB '82, MD '91, PhD			
12:30–2 p.m. *(select one)* ☐ **General Lunch** ☐ **Society of the Silver Stethoscope Lunch** (For those who have celebrated their 60th Reunion)			
2–3 p.m. **Campus Tour**			
3–5 p.m. **Underrepresented in Medicine Gathering** Light reception with students in partnership with the Office of Recruitment and Multicultural Affairs			
7–9:30 p.m. **Recent Graduate Gathering** (Classes of 2003–2017) Rooftop@Revere Bar at the Revere Hotel Boston		$25 *per person*	$

TOTAL ENCLOSED $ _____

Mail this form with your check, payable to *Harvard Medical School,* to the HMS Office of Alumni Affairs and Development, 401 Park Drive, Suite 505, Boston, MA 02215.

List additional guests from page one below.

_____

_____

_____