

Send Check to WHS Alumni Association, 1337 Dickens Drive, Monticello, IL 61856

Name: _____ WHS Year Graduated: _____

Guest Name: _____ WHS Year Graduated: _____

Address: _____ City: _____ State: ____ Zip: _____

Phone Number: _____ Email Address: _____

Please Reserve _____ meals at \$28.00 each. Make checks payable to the WHS Alumni Association. Indicate which class you would like to sit with: _____