

AREA IV RETIREE APPRECIATION DAY

7 NOVEMBER 2009
REGISTRATION FORM

Please send reservation form to Ms. Marleen Rosalie not later than 2 Nov.

E-mail: marleen.rosalie@korea.army.mil or

Mail: US Army Garrison Daegu, ATTN: IMKO-ADH-R, Unit #15746, APO AP 96218-5746

NAME (LAST, FIRST MI.) _____

RANK/GRADE _____ BRANCH OF SERVICE _____

MAILING ADDRESS _____

TELEPHONE _____

E-MAIL _____

1. Attending the Lunch Buffet YES _____ NO _____

2. Family Members attending the Lunch Buffet YES _____ NO _____

Name of Family Members attending the lunch

3. Receiving Medical Services:

Flu Shot YES _____ NO _____

Cholesterol Screening (*Note: For most accurate results, 12 hr fasting is required*) YES ____ NO ____

Blood Pressure Check YES _____ NO _____

Vision Exam YES _____ NO _____

4. Receiving Dental Services:

Note: Appt may be scheduled by contacting the Dental Clinic at 764-4307/4052 beginning 26 October. Walk-ins will be seen on a space available basis.

Cleaning YES _____ NO _____

Screening YES _____ NO _____

The FREE BUFFET LUNCH is only open to Military Retirees, widows/widowers of Military Retirees, and their immediate Family Members. Additionally, Active Duty Service Members that have an approved Retirement and their immediate Family Members may receive a free lunch. Retired ID cards or Retirement Orders will be required and checked at the registration desk located in the Kelly Fitness Center, Camp Walker.