

**The Thunderbird Ski Club**  
**Party Reimbursement Form**

Event Date \_\_\_\_\_

Event \_\_\_\_\_

Breakfast – Wine & Cheese – Dinner

Event Host: \_\_\_\_\_

Address: \_\_\_\_\_

Event Total Cost: \_\_\_\_\_

(Please include all receipts)

\*\*\*Please mail this form and receipts to:

Chip Coughlin  
892 E. Brighton Ave.  
Syracuse, NY 13205  
Phone - 701- 4440  
Fax - 701-3096