



NORTH AMERICAN SCHÜRCH FAMILY REUNION
JULY 24 & 25, 2026
REGISTRATION FORM



	FIRST NAME with Initial	SURNAME	FAMILY CODE
SCHÜRCH DESCENDANT			
SPOUSE			
RELATIVE/FRIEND			
RELATIVE/FRIEND			
RELATIVE/FRIEND			

CONTACT ADDRESS for the Reunion

STREET ADDRESS	CITY	PROVINCE/STATE
POSTAL OR ZIP CODE	EMAIL ADDRESS	TELEPHONE #

Registration Fee: \$135 x ____ = \$ _____

Note: Registration fee includes the following during the reunion: snacks and beverages throughout, lunch (Friday & Saturday), concert, pizza supper, and bus tour. The BBQ banquet is extra.

Gourmet Barbecue Banquet Fee: \$40 x ____ = \$ _____

Please indicate the number in your party that are vegetarian. # ____

TOTAL FEES = \$ _____

For **snacks and lunches** please indicate the number in your party that require vegetarian or gluten-free. Vegetarian # ____ Gluten-free # ____

Mail this form with your cheque/check to the **reunion registrar Zulema Evans.**

107 Yakefarm Blvd, Stouffville, ON Canada L4A 0V2

Make your cheque or money order payable to **The Schürch Family Association.**

If you would like to make a donation to the Association please include a cheque/check noting "**Donation**" in the **Memo** area.

I am bringing an item or two for the auction. **Circle** Yes **OR** No