

# JONES-FOSTER-DORSEY-DRAKE



## REGISTRATION FORM

**Dates: Friday, July 10 - Sunday, July 12, 2026 (3 days)**

**Costs: (includes Get Acquainted, Banquet & T-Shirts)**

Age	Amount Per Person
18 & over	\$115
11 – 17	\$90
4 – 10	\$75
3 and under are free	
<b><u>*If a child 3 and under will occupy a seat, you must pay the \$75 per child</u></b>	

Please complete this form and submit and/or mail with your reunion fees by

**\*\*\*APRIL 30, 2026\*\*\***

Name: \_\_\_\_\_

Best telephone number to contact you (cell, home, or work) \_\_\_\_\_

**TOTAL # OF ATTENDEES \_\_\_\_\_ (please make sure the numbers below match this total.**

<b>AGE</b>	<b>State number of attendees for each age group (A)</b>	<b>Price per each Attendee (B)</b>	<b>Multiply each line (A X B)</b>
<b>18 &amp; Over</b>		<b>\$115</b>	<b>\$</b>
<b>11-17</b>		<b>\$90</b>	<b>\$</b>
<b>4-10</b>		<b>\$75</b>	<b>\$</b>
<b>Total Amount to be paid for all Attendees:</b>			<b>\$</b>

**List full name, age, relationship, and banquet meal choice of each family member included in your registration.**

<b>NAME</b>	<b>AGE</b>	<b>RELATION</b> <small>Ex. Self, spouse, daughter, son, grandchild, etc.</small>	<b>BANQUET MEAL SELECTION</b>		
			<b>Chicken Marsala</b>	<b>Salmon</b>	<b>Kids Meal (age 4-10 ONLY)</b>
			<b>Ages 11 and over ONLY</b>		
SAMPLE JONES	40	SELF	X		

List any special accommodations needed: \_\_\_\_\_

List special dietary needs: \_\_\_\_\_

If you are not registering online, Please return the  
Registration Form, T-Shirt forms and fees by **04/30/2026** to:

LATANYA HYPOLITE  
35422 Alexandria Way  
Beaumont, CA 92223

**\*Payments can be made by any of the following methods:**

Certified money order or cashier check	Mail to: LaTanya Hypolite 35422 Alexandria Way Beaumont, CA 92223
Zelle	Jfdd2020@gmail.com

All payments received are final and non-refundable.

Should you have questions or need additional information, please don't hesitate to contact:

LaTanya Hypolite, Secretary - (909) 215-8821

Curtis Theragood, President - (213) 479-9032

Thank you and God Bless!

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## T-SHIRT ORDER FORM

T-Shirt Sizes: Write in the number of shirts needed for each size.

Number of shirts ordered must match the number of family members registering. If purchasing an infant shirt, add an additional \$7.00 to the total reunion fees.

Infant: 2T \_\_\_\_\_ 3T \_\_\_\_\_ 4T \_\_\_\_\_ (add \$7.00 per shirt; babies only)

Child: S \_\_\_\_\_ M \_\_\_\_\_ L \_\_\_\_\_

Adult: S \_\_\_\_\_ M \_\_\_\_\_ L \_\_\_\_\_ XL \_\_\_\_\_

Adult: 2X \_\_\_\_\_ 3X \_\_\_\_\_ 4X \_\_\_\_\_ 5X \_\_\_\_\_

Total Number of shirts ordered: \_\_\_\_\_

Please return the Registration and T-Shirt Form with fees by **4/30/26** to:

**LaTanya Hypolite**  
**35422 Alexandria Way**  
**Beaumont, CA 92223**

# JONES-FOSTER-DORSEY-DRAKE



## GRADUATES FORM

Please list all graduate names since our last 2024 Reunion

Name	Type of Graduation (elementary, middle school, high school, college)	Name of School

If you are not registering online, Please complete and mail or email  
this form by **04/30/2026** to:

LATANYA HYPOLITE  
35422 Alexandria Way  
Beaumont, CA 92223  
ashebjregjor@gmail.com

LaTanya Hypolite, Secretary - (909) 215-8821  
Curtis Theragood, President - (213) 479-9032

Thank you and God Bless!

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## TALENT SHOW FORM

If you would like to participate in the talent show (singing, dancing, playing an instrument, etc.), please provide the following information:

NAME	TALENT

If you are not registering online, Please complete and mail or email this form by **04/30/2026** to:

LATANYA HYPOLITE  
35422 Alexandria Way  
Beaumont, CA 92223  
ashebregjor@gmail.com

LaTanya Hypolite, Secretary - (909) 215-8821  
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Thank you and God Bless!



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## PAGEANT INTEREST FORM

This reunion will be the 40<sup>th</sup> year since our very first reunion. We are all excited for the family to celebrate this time together. At our family reunion in 2000, we had a pageant for our young boys and girls ages 6 to 12. The children that participated back then are now adults. We would like to have a 2026 pageant. So, if you have a child in the 6-12 age range and would like for him/her to participate, please complete the following information:

Name of Parent	Phone Number	Name of Child	Age	Gender (M or F)

**IF YOU ARE INTERESTED OR HAVE ANY QUESTIONS, PLEASE CONTACT THELMA OR JOYCE BY MARCH 15, 2026 .**

**THELMA ZACHARY AT (909) 633-1530, [ThelmaZack@gmail.com](mailto:ThelmaZack@gmail.com)  
JOYCE THERAGOOD (909) 827-9554, [Theragoodjoyce@gmail.com](mailto:Theragoodjoyce@gmail.com)**



# JONES-FOSTER-DORSEY-DRAKE



## FAMILY REUNION BOOK

We want to make sure that we include everyone in the Family Reunion Book. Please inform us of any new births and any loved ones we have lost. Please provide any updated information since our last reunion in 2022.

NEW BIRTHS		
NAME	PARENTS	BIRTH DATE
DECEASED		
NAME	PARENTS	DATE

If you are not registering online, Please complete and mail or email

this form by **04/30/2026** to:

LATANYA HYPOLITE  
35422 Alexandria Way  
Beaumont, CA 92223  
ashebjregjor@gmail.com