

PAYMENT

Please check the appropriate box below:

□ \$126 for alumni

□ \$252 for alumni and spouse/guest

Register online at www.lsusd.lsuhsc.edu (click on the reunion link on homepage).

Return form and payment in envelope.

Please respond as soon as possible. Send regrets to kkell2@lsuhsc.edu.

LSUHSC School of Dentistry
Office of Alumni Relations
1100 Florida Avenue, Box 143
New Orleans, LA 70119
Joanne Courville, MPA, Director
(504) 941-8367
Katie Kelley, MBA, Assistant Director
(504) 941-8120

Arnaud's

\$126 Inclusive per Person
Four-Course Dinner with Wine
Cash Bar

DINNER MENU

SHRIMP ARNAUD

Cold gulf shrimp marinated in tangy creole rémoulade sauce

CHICKEN AND ANDOUILLE GUMBO

POMPANO EN CROÛTE

Two baby pompano fillets and scallop mousse baked in a puff pastry, served on a bed of green peppercorn sauce

OR

FILET MIGNON AU POIVRE

Seared, pepper-studded prime filet with classic french brandy cream sauce

OR

CHICKEN DUARTE

Chicken breast sautéed with shrimp, tomatoes, garlic, fresh herbs and crushed chile peppers

BABY GREEN BEANS & BRABANT POTATOES

STRAWBERRIES ARNAUD

Fresh strawberries marinated in a port wine sauce, served over vanilla ice cream and topped with whipped cream

COFFEE/HOT TEA/DECAFF





Join us in New Orleans!

LSUHSC School of Dentistry DDS Class of 1999: 15-Year Reunion in Conjunction with the LDA/NODA Annual Session this Spring

Come celebrate our 15-year reunion on Friday, April 4, at Arnaud's in New Orleans from 7:00-10:00 p.m.

Our reunion will be held in conjunction with the Louisiana Dental Association/New Orleans Dental Association Annual Session, which is scheduled for April 3 - 5, 2014. For more information about the session, please visit www.nodc.org.

The cost per person is \$126, which includes a four-course dinner with wine and cash bar.

To register, please return the enclosed reply card with payment or register online at **www.lsusd.lsuhsc.edu.** Click on the reunion logo on the dental school's homepage for information.

If you have questions, contact the LSUSD Office of Alumni Relations at (504) 941-8120 or email kkell2@lsuhsc.edu. Feel free to call or email us as well.

We hope you can join us and look forward to seeing everyone!

Please respond as soon as possible as we need an accurate count of attendees for planning purposes.

Kayla Byrne, DDS krbyrnedds@hotmail.com (318) 524-0700 Bryan Manning, DDS bryansally1@aol.com (337) 625-8787

P. S. In keeping with recent tradition, we would also like to coordinate a class gift in honor of our reunion. All reunion gifts this year will benefit the renovation of the pre-clinical simulation laboratories. In the next few weeks, we will send some information to ask for your support of this important project. This is the single most important facility need currently and we thank you in advance for your consideration.



REGISTRATION FORM

Name			
☐ Spouse Name ☐ Guest	Name		
Home Address			
City	State	ZIP	
Home Phone			
Business Address			
City	State	ZIP	
Business Phone	FAX		
Email			
Cell phone			
\$126 alumni	\$252 w/ spou	se or guest	
Check to LSUH Visa MC		⁄er	
Card Number			
Exp. Date	Security Code (last 3 d	igits on back)	