

MEGA REUNION R.S.V.P.

Name: _____

Graduation Year or Attended: _____

Address: _____

E-Mail: _____

Telephone: _____

Cell Number: _____

***Please include a check payable to Huntingdon Alumni Association for \$25.00 per person by SEPTEMBER 1st.

cut and return top to RSVP Mega Reunion

.....
cut and return bottom for membership

ALUMNI MEMBERSHIP FORM

Name: _____

Maiden Name: _____

Graduation Year or Attended: _____

Address: _____

E-Mail: _____

Telephone: _____

Cell Number: _____

Please include a check payable to Huntingdon Alumni Association for \$10.00 per person and the information requested above for each member