



APPLICATION FOR HONORARY MEMBERSHIP,
GIFT MEMBERSHIP or IN MEMORY/HONOR OF ...
WATKINS GLEN HIGH SCHOOL ALUMNI ASSOCIATION

(Please Print)
(EXPIRES 12/31)

\$25.00 - HONORARY MEMBER
(NOT TAX DEDUCTIBLE)

Name _____ Maiden Name _____

Mailing Address _____

Telephone _____ E-Mail _____



(Please Print)
(EXPIRES 12/31)

\$25.00 - GIFT MEMBERSHIP
(NOT TAX DEDUCTIBLE)

Your name _____

Mailing Address _____

Telephone _____ E-Mail _____

Name of person receiving gift membership _____

Mailing Address _____

Telephone _____ E-Mail _____



(Please Print)

DONATION IN MEMORY OR HONOR OF ...

In the amount of \$ _____ (DONATION IS TAX DEDUCTIBLE)

Name, Mailing Address and Telephone No. of donor(s): _____

(Circle One) In Memory/Honor of _____

Name and mailing address of person to receive Card of Acknowledgement:

WGHS Alumni Association, Inc.
301 12th Street
Watkins Glen, NY 14891-1633



watkinsglenalumni@yahoo.com
www.watkinsglenalumni.org