

APPLICATION FOR INDIVIDUAL MEMBERSHIP WATKINS GLEN HIGH SCHOOL ALUMNI ASSOCIATION

301 12th Street Watkins Glen, NY 14891-1633

(Please Print)

Applicant Name:	
Maiden Name:	or Attended WGHS
Mailing Address:	
Telephone:	E-mail:
Annual Membership Fee is \$25.00 Per Person, with year running from 1/1- 12/31. Please make check/money order payable to WGHS Alumni Association. (ANNUAL MEMBERSHIP FEE IS NOT TAX DEDUCTIBLE)	
_	or class contacts. If you have that class, please let us know!



WGHS Alumni Association contact information:

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

watkinsglenalumni@yahoo.com www.watkinsglenalumni.org

Make the Annual Alumni Banquet a part of your class reunion plans. Graduation Day - Saturday June 26, 2010



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 receivin	g gift membership
Mailing Address	
Telephone	E-Mail
$\bullet \bullet $	
(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 addre	ess 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