

# North Putnam High School Alumni Association

## 2014 Membership/Gift Form

**Yes, I/we want to join the Alumni Association!**

#1 \_\_\_\_\_  
Full Name    Maiden Name    Graduation Year/Spouse/Friend

\_\_\_\_\_  
Mailing Address/City/State/Zip

\_\_\_\_\_  
Preferred Phone    Preferred E-Mail

#2 \_\_\_\_\_  
Full Name    Maiden Name    Graduation Year/Spouse/Friend

*Please list additional memberships with address, phone, and email on the back of this form.*

**My/Our check for \_\_\_\_\_ membership/s at \$10.00 each is enclosed.**

**I/We would like to make an additional commitment to support  
the Alumni Scholarship Fund in the amount of \$\_\_\_\_\_.**

**Please acknowledge this gift:**

In memory of \_\_\_\_\_  
(Classmate, teacher, friend, relative, other)

In Honor of \_\_\_\_\_  
(My Class, classmate, teacher, friend, relative, other)

*Please make checks payable to the **NPHS Alumni Association** and return with this form to:  
**NPHS Alumni Association, P.O. Box 193, Bainbridge, IN 46105. Thank you!***