



Camden Alumni Association



website: www.camdenalumni.com

Alumni Association Annual Dues and Alumni Association Scholarship Fund Donation Form

Please make your check payable to:
Mail your check with this form to:

Camden Alumni Association
Camden Alumni Association
Scott Souva, Registrar
10154 Florence Hill Road
Camden NY 13316

Please write year of graduation on your checks.

Alumni Association Dues: ____ alumni for ____ year(s) = \$ ____
(Dues are \$5.00 per alumni per year)

Camden Alumni Association Scholarship Fund Donation: \$ ____

Grand Total: \$ ____

Please complete the following information for each alumni counted above for the alumni association database update:

Alumni #1:

Name: _____ Class of: _____

Mailing Address: _____

City: _____ State: _____ ZIP Code: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Birth Date: _____ Spouse Name: _____

Alumni #2:

Name: _____ Class of: _____

Mailing Address: _____

City: _____ State: _____ ZIP Code: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Birth Date: _____ Spouse Name: _____

Please complete for additional alumni on the back of this form