



# Camden Alumni Association

website: [www.camdenalumni.com](http://www.camdenalumni.com)



## Alumni Association Annual Dues and Alumni Association Scholarship Fund Donation Form

Please make your check payable to: **Camden Alumni Association**

Mail your check with this form to: **Camden Alumni Association**

**Deanne Suits, Treasurer**

**PO Box 113**

**Camden, NY 13316-0113**

Please write year of graduation  
on your checks.

Alumni Association Dues: \_\_\_\_\_ alumni for \_\_\_\_\_ year(s) = \$ \_\_\_\_\_

*(Dues are \$5.00 per alumnus 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:

(Please Include Maiden Name If Applicable)

#### Alumnus #1:

Check box to use email as primary contact method:

Name: \_\_\_\_\_ Class of: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Spouse Name: \_\_\_\_\_

#### Alumnus #2:

Check box to use email as primary contact method:

Name: \_\_\_\_\_ Class of: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Spouse Name: \_\_\_\_\_

*Please complete for additional alumni on Page 2 of this form*

*Alumnus #3:*

*Check box to use email as primary contact method:*

Name: \_\_\_\_\_ Class of: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Spouse Name: \_\_\_\_\_

*Alumnus #4:*

*Check box to use email as primary contact method:*

Name: \_\_\_\_\_ Class of: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Spouse Name: \_\_\_\_\_

*Alumnus #5:*

*Check box to use email as primary contact method:*

Name: \_\_\_\_\_ Class of: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Spouse Name: \_\_\_\_\_

*Alumnus #6:*

*Check box to use email as primary contact method:*

Name: \_\_\_\_\_ Class of: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Spouse Name: \_\_\_\_\_