

COUNT ME IN—2024

Oak Hill High/Collins High Alumni Association

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Check Number _____

Please Print:

NAME _____

MAIDEN NAME _____

ADDRESS _____

SPOUSE/PARTNER _____

CITY _____ STATE _____ ZIP _____

GRADUATION YEAR _____ If not a graduate, the class year you were scheduled to graduate _____ OTHER, SPECIFY (faculty, friend, parent, child of alumna/us etc.) _____

PHONE _____

Check this box if your address is different than last year's!!

E-mail Address _____

DUES--check appropriate box

Annual Membership Dues.....\$10.00

Joint Life Membership..... \$150.00

Life Membership..... \$100.00

Joint Life Installment, 5@\$30 (Payment # _____)

Life Member Installment, 5@\$20 (#____) \$20.00

\$30.00

Total Dues \$ _____

DONATIONS

\$ _____ for "as needed" use

\$ Donation in memory of _____

\$ _____ to the Alumni Center

It's a great, memory-evoking facility; plan a visit.

\$ _____ for General Scholarships\$

To the _____ fund.

\$ _____ to the John and Dorothy Duda Scholarship

Please send an acknowledgement to the following:

\$ _____ to the Sanger Scholarship

Name _____

\$ _____ to the Zella Bishop Memorial

Address _____

\$ _____ to the Larry Harding Memorial

\$ _____ to the Jenny Wender Memorial

Total Donations \$ _____

2024 Reunion Reservations

Friday events _____ @ \$30.00 \$ _____ Saturday events _____ @ \$30.00 \$ _____

Donation to defray extra reunion expenses: _____

Check Payable to OHHS/CHS Alumni Assoc, , Box 462, Oak Hill, WV 25901

Reservation Deadline: September 12. Please pick up your tickets October 11 from 10 a.m. until 1:00 p.m. at the Alumni Center, 107 Kelly Avenue, or at the door of each reunion event.

SORRY, NO REFUNDS

TOTAL DUES \$ _____

TOTAL DONATIONS \$ _____

TOTAL RESERVATIONS \$ _____

GRAND TOTAL _____