

MEMBERSHIP DUES & DONATION FORM

KBHSAA – ATTN: MEMBERSHIP • PO BOX 56 • KENOSHA, WI 53141 www.kenoshabradfordalumni.com

SOURCE: REUNION

FIRST NAME AND MIDDLE INITIAL / MAIDEN NAME / LAST NAME		CLASS	YEAR	
IF YOU CHOOSE A LIFETIME MEMBERSHIP, PLEASE PROVIDE SPOUSE'S NAME	IS S/HE A BRADFORD ALUMNUS?	IF SO, CLASS YEAR		
STREET ADDRESS	CITY / STATE / ZIP	<u> </u>		
PHONE	EMAIL ADDRESS			
Yes, I'd like to join the Alumni Association! Membership term selected: ☐ Lifetime member – includes spouse membership if Bradford alumnus, \$75.00 ☐ Short-term single membership: 3 Years*, \$20.00			AMOUNT ENCLOSED	
Our Newsletter is published twice yearly; kindly let us know your Newsletter preference: I'll read the online color edition of the Newsletter Please send printed copy via USPS - \$5 annual contribution requested to share printing/postage costs.				
Enclosed please find donation(s) in support of KBHSAA, earmarked for the following: General Operating Fund				
☐ Scholarship Fund				
☐ Distinguished Alumni Award Program				
Other items: • Special gift: □ In memory of □ In honor of occasion In the name of:				
☐ Send notification to address:				
Enclosed is my check payable to KBHSAA for the total at rigi	ht. Thank you for supporting KBH	SAA!	\$	
*Please note: Short-term membership is based upon KBHSAA fiscal year, which runs from July-June; accordingly, all such memberships will carry a June 30 expiration date, with a 6-month grace period to receive renewals.				



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