



San Juan Alumni Association Membership and Donation Form

Date _____

NEW MEMBER _____ RENEWING MEMBER _____ GRADUATION YEAR _____

SJHS FACULTY/STAFF _____ WHAT YEARS AT SJHS? _____

HOW WOULD YOU LIKE TO RECEIVE YOUR NEWSLETTER? _____ EMAIL _____ USPS

Please print clearly and fill in all applicable blanks

FIRST NAME _____ LAST NAME _____

LAST NAME IN HIGH SCHOOL _____ BIRTHDAY _____

MAILING ADDRESS _____

CITY, STATE, ZIP _____

HOME PHONE NUMBER _____ CELLPHONE# _____

EMAIL ADDRESS * _____

SPOUSE NAME _____

SPOUSE SJHS ALUM: ___YES___NO SJHS GRAD YEAR (if applicable) _____

MEMBERSHIP DUES: Alumni Individual/Couple Annual Dues **\$20** per year \$ _____

When making a donation, you may designate a category below

SJAA GENERAL FUND (your donation will be applied where the need is greatest) \$ _____

SJAA SCHOLARSHIP (your donation will be applied to a student scholarship) \$ _____

OTHER (please describe) \$ _____

NEWSLETTER AD: (business card size) **\$50** per year (SJHS alumni only) \$ _____

TOTAL: \$ _____

Please make checks payable to:

San Juan Alumni Association, P.O. BOX 103, Citrus Heights, CA 95611-0103

Visit our website at www.sanjuanalumniassociation.org to pay online

There you may also create a monthly recurring donation

DONATIONS YOU MAKE ARE TAX DEDUCTIBLE!

* Your email address will be used for SJAA communications only. It will not be shared with other organizations.