

Member #
Date



Central Dauphin High School

Alumni Association
www.CDHSAlumni.com
Membership Application



Name: _____
(Current Last) (First) (M.I.) (Maiden)

Graduated from: CD DC Vo-Tech Graduation Year: _____

Faculty Member of: CD DC Vo-Tech From _____ to _____
(Yrs. Employed)

Marital Status: Single Divorced Married

Spouse Name: _____
(Current Last) (First) (M.I.) (Maiden)

CD/ DC Vo-Tech Grad? _____ If so, Graduation Year: _____

Mailing Address: _____
(Street)

(City) (State) (Zip)

Email Address: _____

Home Phone: () _____ Cell Phone: () _____

Birth Month and Day _____ Occupation: _____

Check type of Membership:

_____ **Lifetime (Graduate) @ \$30**

_____ **“Sweetheart” (both graduates) Lifetime @ \$50**

_____ **“Friends of CD” (non-graduate/non-faculty) Lifetime @ \$30**

_____ **“Faculty of CD” (non-graduate) Lifetime @ \$30**

Please add this amount as my contribution to the Scholarship Fund: \$ _____

Please add this amount as my contribution to the Veteran’s memorial Fund: \$ _____

Enclosed is my check or money order # _____ for Total Enclosed: \$ _____

All checks should be made payable to: Central Dauphin High School Alumni Assoc. (CDHSAA)

Mail to: CDHSAA, 2334 Forest Lane, Harrisburg, PA 17112

Please contact me about serving on a committee (Please check all that apply):

- Fundraising
- Special Events
- Scholarship
- Publicity
- History Membership
- Reunion Support

Date Card Mailed _____