

ANNUAL MEMBERSHIP DUES \$20.00 per year

Name _____

Address _____

Email Address _____

Year Graduated _____

Mail to : PHS ALUMNI PO BOX 1105 BLOUNTSVILLE AL 35031

OLD GYM RESTORATION FUND

Please circle one: Class of _____ OR Individual

Name _____

Address _____

Donation amount \$ _____

Mail to : PHS ALUMNI PO BOX 1105 BLOUNTSVILLE AL 35031

ALUMNI DINNER TICKET ORDER FORM

I wish to purchase _____ ticket(s) at \$100 per ticket.

Total enclosed \$ _____

Name _____

Address _____

Mail to : PHS ALUMNI PO BOX 1105 BLOUNTSVILLE AL 35031