



El Paso High School Alumni Association

Alumni Membership Application

MEMBERSHIP PROMOTION

EPHS MEMBERSHIP \$35 (valid until 12/31/2024)

First _____ Maiden _____ Last _____

Address _____

City, State, Zip _____

Email _____ Phone _____

Year you graduated _____ or years you attended _____

I want to join the EPHS Alumni Association

- Annual Membership \$35 (valid until 12/31/2024)
- I am paying by check - *Make checks payable to EPHS Alumni Association*
- I am paying by credit card

Credit Card Information

Name on Credit Card _____

Credit Card Number _____

Expiration _____ CSV _____

If paying by check or credit card

Print the form and enclose a check, and mail to
EPHS Alumni Association
PO Box 5024
El Paso TX 79953

To donate or join online
ephsalumniassoc.com