

El Paso High School Alumni Association

Alumni Membership Application

MEMBERSHIP PROMOTION

EPHS MEMBERSHIP \$35 (valid until 12/31/2023)

| First | Maiden | Last | |
|---|---------------------|--------------------------|------------------|
| Address | | | |
| City, State, Zip | | | |
| Email | Phone | · | |
| Year you graduated | or years yo | u attended | |
| I would like to join t | he EPHS Alumn | i Association | |
| ☐ Annual Membership | \$35 (valid until 1 | 12/31/2023) | |
| □ I would are paying b □ I would are paying b | • | ecks payable to EPHS Alu | ımni Association |
| Credit Card Information Name on Credit Card | mation d | | |
| Credit Card Number | · | | |
| Expiration | | _ CSV | |

If paying by check

Print the form and enclose a check, and mail to Robert Novick, Class of 1966
4304 Donnybrook
El Paso, TX 79902

If paying by credit card

You can print the form and mail to Robert Novick or email to rdnovick@gmail.com

To donate or join online

ephsalumniassoc.com