Richmond Chapter

West End High School National Alumni Association

**MEMBERSHIP APPLICATION/SCHOLARSHIP DONATION**

**Date\_\_**     **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

# **Name**\_\_     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_     \_\_\_\_\_\_\_\_\_\_\_\_\_

**First Middle/Maiden Last**

**Address**\_\_\_     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_

**City**\_\_     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_State \_\_\_     \_\_\_\_\_\_\_\_\_Zip\_\_     \_\_\_\_\_\_

Telephone #\_\_     \_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_Class Year\_\_\_     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**National Membership** –\_\_$15.00**\_\_\_\_\_\_\_\_\_\_\_\_\_** (Will be forwarded to the National )

**Chapter Dues** –\_\_\_ \_$30.00\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Total\_\_**     **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Note: To be a member of the National Alumni Association, you must belong to a local chapter. Dues are encouraged to be paid prior to the reunion in June.**

**Signature**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I wish to help send descendents of those who attended WEHS to college by making the following donation:**

**$25 $50 $75 $100**

**Other (specify amount)**

**(Donations are tax deductible.)**

**Make all checks payable to Richmond Chapter, WEHS Alumni Association and mail to:**

**Treasurer**

**Richmond Chapter, WEHS Alumni Association**

**P O Box 28154**

**Richmond, VA 23228**

***You may duplicate this form to share with another alumnus***.