

A.H. Anderson High School Alumni Association

Membership Application

Name: _____
 First Last (Maiden Name if Married Female) (Nickname)

Address: _____
 Number Street City State Zip

Telephone # (____) ____ - ____ Home (____) ____ - ____ Mobile Email: _____

Years Attended Anderson: 19_____, Graduation Class _____

Extra Curricular Activities: i.e. Band, Athletic Teams, Student Government or other: _____

Favorite Teacher(s): _____

Most Memorable Event: _____

Membership Option: Please indicate the level of membership below:

- General Membership \$25.00 annually: Support the year to year programs of the association
 Legacy Membership: \$250.00: A lifetime investment in the future of the association
Legacy members are recognized at alumni events and presented with awards

Enclosed is my check in the amount of: \$ _____

I am interested in volunteering in the following service areas:

- Tutoring, Mentoring Youth at Diggs Latham Male Mentoring
 Planning and Coordinating Fund Raising Events
 Membership Recruitment
 Public Relations (Newsletter, Social Media: Website, Face book) _____
 Community Service/Charitable Projects

President: Theodis Foster email: fost3648@bellsouth.net

Membership Chairperson: Clyde A. Moore, Jr. Email: cmpreacher48@yahoo.com

A.H. Anderson Alumni Association Meeting Dates:

Executive Board Meeting (Officers meet) 4th Tuesday of each month

General Membership Meeting: 2nd Tuesday of each month

Meeting Location: New Light Missionary Baptist Church, 1535 E. 15th St, Winston-Salem

Complete this application and return it with your check to:

Anderson Alumni Association, Inc.
P.O. Box 21321
Winston-Salem, NC 27120

You may also bring the application to an alumni meeting.