ALUMNI ASSOCIATION MEMBERSHIP



Please type or print.

4500 Memorial Drive Houston, TX 77007-7332 Tel: 713-864-2606 ext. 150 Fax: 713-864-6402 w w w . s t h s . o r g

ALUMNI INFORMATION

Last Name	First		Middle		Nickname
Street Address					
City	State		Zip Code		
Home Phone			Name of Spouse		
Preferred E-mail Address				Graduation Year	
COMPANY INFORM	MATION				
Company Name					
Street Address		City	State	Zip Code	<u> </u>
Business Telephone	Business FAX Number		r	Occupation	
DUES FOR TH	E CURREI	NT SCHO	OL YEAR	SEPTEMBE	R - J U N I
Annual Membership \$50					
Life Membership \$400					
Make check payable to St. Th	omas Alumni Associa	ation. Send check t	o 4500 Memorial Dr	rive, Houston, TX 77007	7-7332.
Credit Card (circle one): M	astercard Visa	American Express	Discover Signat	ure:	· · · · · · · · · · · · · · · · · · ·
Account #	Exp.				