

## **EHSAA LIFETIME MEMBERSHIP ENROLLMENT FORM**

Complete this form, or to join online, visit  
*[edgewoodhs.org/alumni/lifetime\\_membership](http://edgewoodhs.org/alumni/lifetime_membership)*

First Name \_\_\_\_\_ M.I. \_\_\_\_\_

Last Name \_\_\_\_\_

Maiden (*if applicable*) \_\_\_\_\_ Class Year \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

HomePhone (\_\_\_\_\_) \_\_\_\_\_

Cell Phone (\_\_\_\_\_) \_\_\_\_\_

E-Mail \_\_\_\_\_

*(to provide updated membership benefit information and e-newsletter)*

Occupation \_\_\_\_\_

### **Payment Information**

**Lifetime Membership** – \$250 one-time payment

Credit Card:  MasterCard  VISA

Name on Card \_\_\_\_\_

Card Number \_\_\_\_\_

Expiration Date \_\_\_\_/\_\_\_\_ 3-digit security code \_\_\_\_\_

Signature \_\_\_\_\_

Check payable to **EHS Alumni Association** enclosed

Return this form to:

Edgewood High School, c/o Alumni Membership,  
2219 Monroe Street, Madison, WI 53711

We will mail you a Lifetime Membership Card  
upon receiving the completed form and payment.