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|  | Annual Membership Renewal OR Change of Address | | | | | | | | | | | | | | | |  |
| Name | | |  | | | | | | | | | Grad Year | | | |  | |
| Name | | |  | | | | | | | | | Grad Year | | | |  | |
| Mailing  Address | | |  | | | | | | | | | | | | | | |
| City, State, ZIP | | | |  | | | | | | | Phone: | | |  | | | |
|  | | | | | |  |  |  |  |  | | |  | | | | |
|  | | | | | | $15 Single |  |  | $25 Couple |  | |  | | | | | |
| **Contributions beyond the fees above are greatly appreciated and Tax Deductible** | | | | | | | | | | | | | | | | | |
| $ | |  | | | Additional Donation to benefit Hemet Schools | | | | | | | | | | | | |
| **Total Amount Enclosed $** | | | | | | | | | | | | | | |  | | |

All checks payable to Hemet Alumni Association (or HAA), Mail to: P.O. Box 385, Hemet, CA 92546