

INDEPENDENCE HIGH SCHOOL ALUMNI ASSOCIATION

To: Parents of Graduating Seniors

From: Elaine Wisnieski (57) Kukawka, Corresponding Secretary

Re: LEGACY RIBBON PINNING CEREMONY

The Alumni Association has started a Legacy Ribbon Pinning Ceremony which is held on graduation day just a few minutes before the start of commencement ceremonies. If you are an IHS alum, and would like to participate in this program with your graduate, you must be a member of the Alumni Association.

Please take a minute to join by filling out the application attached & have your graduate return it to the alumni mail box in the school office. Your graduate is automatically an honorary member for one (1) year.

As part of your dues, which are \$10.00 yearly or \$40.00 for 5 years, you will receive a copy of the ALUMNI SPECTATOR in June and November and you will also be helping us continue our Alumni Graduating Senior Award program which your child can apply for. This past year we were able to give a \$500.00 award to a graduating senior, and a \$250.00 award to another graduating senior.

The application must be returned to us no later than the first of May in the graduating year.

Thanks for your consideration in joining the INDEPENDENCE HIGH SCHOOL ALUMNI ASSOCIATION.

Attachment

LEGACY MEMBERSHIP APPLICATION
INDEPENDENCE HIGH SCHOOL ALUMNI ASSOCIATION
6001 ARCHWOOD, INDEPENDENCE, OH 44131

“PROMOTING EDUCATIONAL MEMORIES, ONE CLASS AT A TIME”

(Please print legibly)

NEW _____ **RENEWAL** _____

Class of: _____ Last Name: _____ First Name: _____ M__ F__

Maiden Name: _____ Class of: 2014 Graduate's Name: _____

Street Address

Apartment / Suite No.

City

State

Zip Code

Home Phone

Cell / Work Phone

Email Address

Is your spouse an IHS grad?

Spouse's Name (Include Maiden Name)

Year Graduated

Please circle your preference if you are interested in serving on a committee:

Alumni Spectorator

Class Representative

Fund Raising

Historical

Membership

Nominating

Phone Calling

Public Relations

Other _____

Relatives

We would like to include IHS graduate family members in our mailing list. Please provide their information on an additional application or the back of this form. Include relationship, maiden name, class, and if applicable, deceased date.

Disclaimer

Membership information will not be released to any outside interests with the exception of a duplication company to publish an Alumni Directory. With your approval membership information may be published in our Alumni Spectorator. Access or use of a member's information other than for Alumni purposes is strictly prohibited.

I /Approve/ /Do Not Approve/ to publishing my information. _____
Circle One Initials

ANNUAL DUES \$10 PER YEAR

5-YEAR MEMBERSHIP \$40

Annual Dues cover the period from June 1ST to May 31ST the following year

MAKE CHECKS PAYABLE TO IHS ALUMNI ASSOCIATION

\$ _____
Dues Amount

\$ _____
Contribution Amount

\$ _____
Total Amount Enclosed

(We are a 501(c) (3) organization)

Thank you for helping us giveback to our alma mater. This year (2013) we were able to provide a monetary award to two (2) graduating seniors and finalize the 2012 purchase of an iPod for the Media Room.