



*We are pleased to announce the Charter Year for the Sharon Alumni Association.  
Please join us by completing the form below.*

**NAME** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**PHONE NUMBER** \_\_\_\_\_

**CELL PHONE NUMBER** \_\_\_\_\_

**EMAIL ADDRESS** \_\_\_\_\_

May we share your information with the other alumni via email etc.?  Yes  No

What are your plans for after graduation? \_\_\_\_\_ Name of College or University  
 Yes, I would like to be active in the Alumni Association. Please let me know what I can do.

Please check off and sign an area below:

I am 18 years or older and understand that this information may be used to create an internet based alumni site.

Student's Name (Print) \_\_\_\_\_

Student's Signature \_\_\_\_\_ Date: \_\_\_\_\_

Because my son or daughter is not yet 18, I am signing this release for my son/daughter to allow this information to be used to create an internet based alumni site.

Parent's Name (Print) \_\_\_\_\_

Parent's Signature \_\_\_\_\_ Date: \_\_\_\_\_