

# EL SEGUNDO HIGH SCHOOL

## ALUMNI ASSOCIATION

### MEMBERSHIP REGISTRATION FORM

MAIL COMPLETED ESHSAA MEMBERSHIP REQUEST FORM TO:

EL SEGUNDO HIGH SCHOOL ALUMNI ASSOCIATION

P.O. BOX 2733 EL SEGUNDO, CA 90245

OR FAX COMPLETED REGISTRATION FORM TO 866-343-9405.

YOU MAY ALSO REGISTER ONLINE AT: [www.ElSegundoAlumni.org](http://www.ElSegundoAlumni.org)

#### \* REQUIRED FIELDS

FIRST NAME\*

MI

LAST NAME\*

MAIDEN NAME

Graduation Year:\*

YYYY

EMAIL:

PHONE:  -  -

ADDRESS:

CITY:

STATE:

ZIP:

MILITARY SERVICE?

Yes

No

BRANCH:

VOLUNTEER? (CIRCLE)

CLASS REPRESENTATIVE

BOARD MEMBER

OTHER (SPECIFY IN COMMENTS)

The information you supply is safe! Your personal data will never be shared with other individuals or groups without your permission. Our website will only document your name, city, and state. If you prefer we can leave city and/or state blank on the website. Please specify in comments section.

COMMENTS: