

Name: \_\_\_\_\_

Age: \_\_\_\_\_

High School: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Name of Parent(s): \_\_\_\_\_  
or Legal Guardian (s)

Address: \_\_\_\_\_  
(For Prints!)

Favorite high school memory: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_