

2021 DONATIONS & DUES

DUES \$10 annually x # years you'd like to pay _____ = \$ _____

DONATIONS Alumni Association \$ _____

Scholarship Fund \$ _____

TOTAL ENCLOSED \$ _____



Name _____ Class of _____
(please print)

Name _____ Class of _____
(please print, include maiden name if applicable)

Mailing Address: _____

Email Address: _____

Please return this page with your check to:

**LHS Alumni Association
PO Box 911
Lebanon, NH 03766**