

FOOTHILL HIGH SCHOOL ALUMNI ASSOCIATION

Application for Membership

Full Name _____

Maiden Name (if different) _____

E mail Address _____

Cell number _____

Foothill Connection (Check one):

Alumni _____

Staff _____

Teacher _____

Supporter _____

Graduation Year _____

Years _____

Years _____

\$40 Annual Fee to be paid by:

- Check
- Pay Pal
- Credit Card

Checks can be mailed to:

Foothill Alumni Association

Attn: Doug Wilson

9800 Green Oak

Bakersfield, CA 93311