JAMES B0WIE ALUMNI ASSOCIATION

Application for Membership

I/We want to be a part of the vision of the James Bowie Alumni Association and to support the James Bowie School System and its Alumni Programs and Projects**.**

Name _____, _____ _____ _____
Last **First** **Middle** **Maiden**

_____ _____
Class year **Status as related to James Bowie ***

Spouse's Name _____, _____ _____ _____
(if they choose to join **Last** **First** **Middle** **Maiden**

_____ _____
Class year **Status as related to James Bowie ***

*** Graduate, Former student, Spouse of graduate or former student, Former/current staff member, Friend of James Bowie (Please write in all that apply)**

Street Address: _____

City: _____

State: _____ Zip: _____

Phone: _____ Email: _____

DUES: $5.00 per year per member (Both spouses are encouraged to join)
$20.00 for 5 years per member
$40.00 for 10 years per member

Checks payable to: **James Bowie Alumni Association**

Mail to: **James Bowie Alumni Association**
P. O. Box 9
Simms, TX 75574

PLEASE indicate on the back of this application or on a separate page:

- Your willingness to serve in any capacity on the Alumni Association, i.e. office, committee or any other area of interest.
- Your suggestions to improve the effectiveness of this association.
- Your suggestions and/or nomination of graduates and/or former students who have distinguished themselves as successful members of society that may be worthy of recognition.