

Wayne High Schools Alumni Association (WHSAA)
DONATION FORM* Please Print

Enclosed please find my check (payable to WHSAA) for the amount indicated

\$100 ____ \$50 ____ \$25 ____ Other \$ _____

Your Name: _____ Class of _____
(Women - please include maiden name) (or year you would have graduated)

Your Address Winter: _____ City _____ State _____ Zip (9 digit) _____

Your Address Summer: _____ City _____ State _____ Zip (9 digit) _____

Your Email Address: _____ Phone Number: _____

My contribution is: *In Memory of* OR *In Honor of* (Please circle one)

Name: _____ **Year of Graduation:** _____

* Contributions are tax-deductible (Exempt under Section 501 (c)(3) of the Internal Revenue Service Code.
Donation tax laws changed in 2007. Email TillieVanSickle@yahoo.com if verification is needed.

Mail to: WHSAA P.O Box 703 Wayne, MI 48184