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

Enclosed please fin	\$50 \$25	Other \$
Your Name:		Year of Graduation
Your Address:	City	State Zip (9 digit)
Your Email Address:		Phone Number:
My contribution is: In Men	nory of <u>OR</u> In Honor of	(Please circle one)
Name:		Year of Graduation:

Donation tax laws changed in 2007. Email TillieVanSickle@yahoo.com if verification is needed.

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