



SCOTT'S BRANCH HIGH ALUMNI ASSOCIATION

Membership Application

Membership Fee: \$15/calendar year

Lifetime Membership: Attained age through 30: \$240

31-40 : \$225

41-50: \$205

51-60: \$185

61-70: \$155

71-80: \$125

81 & Over: \$95

APPLICANT INFORMATION

Name:

Year of Graduation:

E-mail:

Phone: () -

Current address:

City:

State:

ZIP Code:

SIGNATURES

I authorize the sharing of the above information with Scott's Branch High School Alumni Association and its members: YES NO

Signature of applicant: _____

Date: ____/____/____

Membership Year: 20____ - 20____

Type of Membership: Annual

Life

Payment Method: Check

Money Order

Credit Card ([Using PayPal](#))

Make check or money order payable to Scott's Branch High Alumni Association (SBHAA).

Your membership card will be mailed to the address on your application.

Mail To: Scott's Branch High Alumni Association

Post Office Box 1374

Summerton, SC 29148

All proceeds from membership fees go into the scholarship fund.