

Alumni Information

Please Complete the following data sheet to the best of your recollection:

First Name	Maiden Name	Married Name
_____	_____	_____
Graduation Year	Phone Number	
_____	_____	
Address		

City	State	Zip Code
_____	_____	_____
Email Address		

Please check any clubs, organizations or athletics you were involved in while attending East Clinton:

<input type="checkbox"/> Basketball	<input type="checkbox"/> Football	<input type="checkbox"/> Tennis
<input type="checkbox"/> Baseball	<input type="checkbox"/> Cross Country	<input type="checkbox"/> Golf
<input type="checkbox"/> Cheerleading	<input type="checkbox"/> Softball	<input type="checkbox"/> Marching Band
<input type="checkbox"/> Academic Team	<input type="checkbox"/> Drama/Musicals	<input type="checkbox"/> Student Council
<input type="checkbox"/> Track	<input type="checkbox"/> FFA	

Please submit to East Clinton Alumni, 97 Astro Way, Sabina, OH 45169 or bonnie.kelly@eastclinton.org