

Ephrata Alumni Association

2024 Membership Application Scholarship/Memorial Donation Form

Alumni Name _____ Class Year _____

Associate (supporter) _____

Address _____

Email _____

Annual membership	\$ 10.00	Annual membership fee of \$10.00 is due each January.	
Life membership	\$100.00	Life membership of \$100.00 is a one-time fee.	
Veteran membership	\$ 75.00	Life memberships of \$75.00 is a one-time fee for military veterans.	
Associate membership	\$ _____	Annual and life levels of membership available to supporters.	
Scholarship donation	\$ _____	In any amount, thank you.	
Memorial donation	\$ _____	In the name of _____	Class Year _____
Memorial membership	\$ 100.00	In the name of _____	Class Year _____

Checks payable to Ephrata Alumni Association Total Enclosed \$ _____

Mail to: Ephrata Alumni Association
Scholarship Chairman Gail Smith-Scellick
48 H ST NE
EPHRATA, WA 98823