



Complete the membership form and return it with your dues to the Alumni Office, P.O. Box 734, Boaz, AL 35957.

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Email address \_\_\_\_\_

Type of Membership:     Annual (\$10 per year)     Lifetime (\$100 one time)

I am a Snead graduate. Year of Graduation: \_\_\_\_\_

I attended Snead as a student. Years of Attendance: \_\_\_\_\_

I am a current Snead student. (Dues: \$5/annual; \$50/lifetime)

I didn't attend Snead, but I would like to join as an Alumni by Choice.

Check us out on Facebook (@sneadstatealumni), Twitter and Instagram (@sneadalumni)!  
Visit us at [www.snead.edu/alumni](http://www.snead.edu/alumni) or contact our office at [alumni@snead.edu](mailto:alumni@snead.edu).