

**ALUMNI EVENTS AND PUBLIC RELATIONS  
PUBLICITY RELEASE FORM**

**CLASS OF 2018**

**NAME**

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Last Name	First Name	M.I.	Maiden
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**PERMANENT ADDRESS**

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Street Address	Apt. #
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City ( )	State	Zip	County
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Phone Number	Email
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**SCHOOL ADDRESS**

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Street Address	Apt. #
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City ( )	State	Zip	County
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Phone Number	Email
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**PARENTS AND/OR SPOUSE**

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Name/address

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Name/address

**EDUCATION**

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High School	Year
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Undergraduate	Degree	Year
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Graduate	Degree	Year
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