

Lansing High School Alumni Association, Inc.
P.O. Box 27
Lansing, Kansas 66043
www.lansingalumni.com

Name _____ Year Graduated _____

Address _____

City/State/Zip _____

Email Address _____

Spouse/Guest Name _____

DINNER/DANCE RESERVATIONS (\$18 per person) **YOURSELF** \$18.00
SPOUSE/GUEST _____

I am enclosing a donation in the following amount for the Lansing Alumni Scholarship Fund.

\$5 _____ \$10 _____ \$25 _____ \$50 _____ \$100 _____ Other _____

Or donation to the association to be used where most needed _____

Total Enclosed _____

Your donations are tax deductible since we are now a 501(c) (3) tax exempt organization

Please make all checks payable to Lansing High School Alumni Association

Please note the following change of address for a fellow alumni

Name _____ Name _____

Address _____ Address _____

City/State/Zip _____ City/State/Zip _____

Year Graduated _____ Year Graduated _____

You can also go to www.lansingalumni.com to update your address