



Friends Forever...Memories Forever...Pride Forever

“Eagles Forever” Alumni Reunion Registration Form

Name: _____

Address: _____

Home Phone: _____ Cell: _____

E-Mail: _____

Year Graduated: _____

How did you hear about the Reunion? Ad ___ Flyer ___ Website ___ Alum ___ Other _____

Mail completed form to:

St. Ethelreda School

8734 S. Paulina Street

Chicago, IL 60620

\$20 in Advance / \$25 at the Door

Make check payable to: St. Ethelreda School