



The FHHS Alumni Association



Honoring the Past...Building a Legacy for the Future

Post Office Box 2727 • Landover Hills, MD 20784

MEMBERSHIP APPLICATION

Membership Status:	New Member	Returning	Active/Current
Purpose:	Address Change	Dues/Payment	Donation

Date Submitted _____

Name: _____ Graduating Class: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____

E-Mail: _____ Social Media: _____

Preferred Contact: Mail E-Mail Text Other, Specify: _____

Lifetime Membership (Can be paid in 2 installments of \$100.00 in the same year)

5 year Membership \$40/5 years

Annual Membership \$10/year

Type of Member:

Alumni Current Student Faculty/Staff Affiliation _____

Donation Designation Scholarship Fund Special (Specify): _____

Please make TAX DEDUCTIBLE check/money order payable to FHHSAA

Mail to: FHHSAA / P.O. Box 2727 / Landover Hills, MD 20784-0727

or Electronic Payment via CashApp @ \$FHHSAA2727

Please join a committee listed below. Refer to website for committee function.

Constitution & Bylaws	Budget	Historical	Legacy	Membership
Memorial Service	Nominating	Scholarship	Ways & Means	

Please share your profession/unique skills

Website: fhhsaainc.com ★ Email: alumni@fhhsaainc.com