

# Reunion Memory Book Form

Please add additional sheets if more space is needed. If you would like to include a photo for the memory book, we will be happy to return it to you once the book is complete.

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Last Name: \_\_\_\_\_ Maiden Name: \_\_\_\_\_

Graduation year: \_\_\_\_\_ Major: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_

Is your spouse a C.U. alumna/us? \_\_\_\_\_ Year: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Children (if applicable): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Grandchildren (if applicable): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Additional Education: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Professional Career: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Honors/Awards/Accomplishments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Hobbies/Interests: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Fondest memory of Campbell University: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Any other information you would like to share with your classmates? \_\_\_\_\_

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Please return completed form and a current photo\* of yourself, by August 30, 2009 to:

Campbell University

Attn: Reunion Memory Book

P.O. Box 26

Buies Creek, NC 27506

*\*Please include your name and address on the back of the photo.*