Tallmadge Alumni Association Database Update Form

Class Information	**REQUIRED**						
THS Class Year							
Graduate from THS?		Yes			No		
Personal Information	**REQUIRED**						
Prefix (Mr, Mrs, Ms, Dr)							
First Name							
Last Name							
Suffix							
Student First Name							
Student Last Name							
Contact Information	**REQUIRED**						
Street							
City							
State							
Country							
Zip Code							
Phone							
Primary Email							

Family		**If THS Graduate, List Class Year**
Spouse Name		
Child		
Child		
Child		
Child		
Child		
Child		

Comments