



Name: \_\_\_\_\_  
Last \_\_\_\_\_ Middle/Maiden \_\_\_\_\_ First \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ Alt. Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Class of \_\_\_\_\_ Degree(s): \_\_\_\_\_

Did you transfer to another institution after Andrew? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, to where did you transfer? \_\_\_\_\_

Date of graduation from transfer institution: \_\_\_\_\_

Degree(s) from transfer institution: \_\_\_\_\_

Current Employer: \_\_\_\_\_ Job Title: \_\_\_\_\_

If your spouse also graduated from Andrew, please list their name, class year, and professional information: \_\_\_\_\_  
\_\_\_\_\_

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\$25 Annual Fee or  \$163 Lifetime Membership Fee (No renewal)

Please enclose check or money order made payable to the Andrew College Alumni Association. Mail completed form and dues to:

Andrew College  
Development Office  
501 College Street  
Cuthbert, GA 39840

**OR join and pay online at [www.andrewcollege.edu/alumni-association-online-form](http://www.andrewcollege.edu/alumni-association-online-form)**