



ALUMNI ASSOCIATION

Chapter/Club/Group _____

Event _____

Date _____

Everyone sign their name & check classification box.

→Last First M.I./Pref. Name

E-mail

Alumni - Class Year _____ | Spouse | Friend | Attended MSU but didn't graduate - Years _____

Prospective/Future MSU Student - Grade in School _____ | Parent of Student | Other _____

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MISSISSIPPI STATE
UNIVERSITY™

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