

TBI Contact Information Update

FULL NAME _____

Would you like to be called
on the local call list?

ADDRESS _____

YES / NO (circle one)

CITY _____ STATE _____

Do you currently receive the
Maroon & White?

ZIP _____ PHONE _____

YES / NO (circle one)

E-MAIL _____

SEMESTER PLEDGED TBI _____ (e.g. Spring 1926)

SEMESTER GRADUATED _____

Fill out & Mail to:

TBI Alumni Association
C/o Erickson Alumni Center
1300 Locust Avenue
Fairmont, WV 26554

Please include any other Cell or Work numbers that
will assist us in contacting you.

If you don't use e-mail, but someone in your household does;
please list their's so we can send you more timely information.