



\$20 per individual or \$40 per family  
 LIFE TIME MEMBERSHIP \$300 for Individual or \$500 for Family  
 (2 checks; 80% to Auburn University Foundation; 20% to WGAC)



PRINT AND MAIL WITH YOUR CHECKS TO

West Georgia Auburn Club

1030 Riverside Dr.

LaGrange, GA 30240

West GA AU Club QUESTIONNAIRE

*Please complete and return questionnaire as soon as possible.*

\_\_\_\_\_ ( \_\_\_\_\_ )  
 \*Full Name \* Maiden

\_\_\_\_\_  
 \* Spouse's Name

\_\_\_\_\_  
 \* Address

\_\_\_\_\_ \*City \_\_\_\_\_ \*State \_\_\_\_\_ \*Zip +4 digits

\_\_\_\_\_  
 \*Children (Name and ages)

\_\_\_\_\_ \*Company \_\_\_\_\_ \*Title

\_\_\_\_\_ \*Home Phone \_\_\_\_\_ \*Cell Phone \_\_\_\_\_ \*Email Address

\_\_\_\_\_ Birth date: \_\_\_\_\_ 19\_\_\_\_\_  
 \*Name as you want it to appear in the directory

\_\_\_\_\_ \*Year graduated from AU \_\_\_\_\_ \*Degree from AU

\_\_\_\_\_ West GA AU Club Member \_\_\_\_\_ AU Alumni Member

\_\_\_\_\_ \*AU Groups formally member \_\_\_\_\_ \*Fraternity or Sororities Membership

\_\_\_\_\_  
 \*Your hobbies/interests

Ways you can help the West GA AU Club

Please list names of other AU Graduates that you are in touch with: \_\_\_\_\_

Any questions above with an \* beside it will be printed in our West GA AU Club Directory.

If you DO NOT WANT THIS INFO PRINTED, please initial here: \_\_\_\_.

\*\*\*\*\*Your prompt response to this questionnaire and pictures for the slide show will be greatly appreciated! \*\*\*\*\*