

# QUESTIONNAIRE

**YOUR HIGH SCHOOL \_\_\_\_\_ GRADUATION YEAR \_\_\_\_\_**

**Please return this questionnaire promptly - - whether or not you are planning to attend the reunion - - so that your information can be compiled for inclusion in the directory/memory book.**  
(Please Print)

**First Name:** \_\_\_\_\_ **Mi:** \_\_\_\_\_ **Last Name** \_\_\_\_\_ **Maiden Name** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City** \_\_\_\_\_ **ST** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Phone:** (\_\_\_\_) \_\_\_\_\_ **PREFERRED FIRST NAME FOR NAME TAG** \_\_\_\_\_

**E-MAIL ADDRESS** \_\_\_\_\_

**Publish Information in Memory Book**

**Yes** \_\_\_\_\_ **No** \_\_\_\_\_

**MARITAL STATUS:** **SINGLE** \_\_\_\_\_

**MARRIED** \_\_\_\_\_

**IF APPLICABLE, SPOUSE'S NAME:** \_\_\_\_\_

**OTHER** \_\_\_\_\_

**CHILDREN: (NAMES, AGES, ETC.)** \_\_\_\_\_  
\_\_\_\_\_

**NUMBER OF GRANDCHILDREN:** \_\_\_\_\_

**CURRENT**     **FORMER**    **OCCUPATION(S):** \_\_\_\_\_

**CURRENT**     **FORMER**    **SPOUSE'S OCCUPATION:** \_\_\_\_\_

**PLEASE GIVE US THE NAME AND PHONE NUMBER OF SOMEONE WHO WILL KNOW HOW TO CONTACT YOU BEFORE THE NEXT REUNION IN THE EVENT YOU MOVE:** \_\_\_\_\_  
\_\_\_\_\_

**CATCH US UP TO DATE SINCE WE LAST HEARD FROM YOU (Please limit your response to 100 words):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FAVORITE MEMORY FROM MY HIGH SCHOOL DAYS:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**WHAT EVER HAPPENED TO .....** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**Thanks for sharing the news! Please return this form  
THE FRIDAY THREE WEEKS before YOUR REUNION to:  
**CLASS REUNION, PO BOX 4142, AKRON OHIO, 44321-0142.**  
Questionnaires not returned by the due date will not appear in the memory book.  
Email: [rpinc@adelphia.net](mailto:rpinc@adelphia.net) or call ahead fax: 330-666-1193**