



LIFE MEMBERSHIP
PROFILE and REQUEST FORM

NATIONAL ALUMNI ASSOCIATION PHILANDER SMITH COLLEGE, INC. (NAAPSC)

Please complete and return this form to ensure we maintain a current record of contact data and comply with your request for information.

(Please type or print clearly)

Effective date:

First Name

Last Name

Current Address

City

State Zip Code

Birth Month & Date

Chapter Affiliation

Home Phone Cell Phone

Graduation Date (Month/Date/Year)

Email Address

Signature



Please provide me a copy of the full Life Membership roster. I am a Life Member and eligible to receive the information being requested.

Please return the completed form to: Herman L. Davis, Chairman Life Membership Committee, 405 Park Drive, Glenwood, IL. 60425, phone number (708) 288-7588 -OR- Email: hdavispsc1973@gmail.com

THANK YOU!