



**Red Oak ISD Alumni Association
Membership Application Form**

Date: _____

Name: _____ **Maiden Name:** _____

Graduation Year or time period in ROISD: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Email: _____ **Phone:** _____

Membership Fee: (\$10 per year/per person)

Alumni Update: Please share a brief history since graduating from high school.
(College – Marriage – Occupation - Children – Grandchildren – Hobbies - Anything you would like us to know about you.)

Mail to:
ROHS Alumni Association
Attn: Laura Kelly
PO Box 9000
Red Oak, TX 75154
or send via email: laura.kelly@redoakisd.org