AXP Reunion July 5, 6 and 7, 2024



Ex-Pupil: Past Student

Employee: Retired or Former Employee of the Home **Associate:** Spouse or Family of Ex-Pupil or Employee 18 or Older **Junior Associate:** Family of Ex-Pupil or Employee 17 or Younger **Community Member:** Any person 18 and older who demonstrates a desire to help fulfill the mission of the AXP (Board Approval Required) **Honorary Member:** An honor bestowed by the AXP Board to outstanding members

Ex-Pupil:					\$30.0
•	(Last)	(First)	(Maiden)	(Class of)	
Double Ex-Pupil: _					_ \$30.
	(Last)	(First)	(Maiden)	(Class of)	
Honorary Member:					_ (Fre
	(Last)	(First)	(Maiden)	(Class of)	
Employee, Associa Community:					_ \$30.0
Circle One Above	e) (Last)	(First)	(Write Additional Associates of	n Back)	
Junior Associate:					\$10.0
	(Last)	(First)	(Write Additional Juniors on B	ack)	
Information Update: Is There a Change? (No need to fill out if no change)			<u>H</u> elp <u>O</u> ur <u>Museum E</u> ndure Project (H.O.M.E. Project)		
Address:			CADET:	Annual Pledge \$ 25.	00
City:			RESERVE CADET:	Annual Pledge \$ 50.	00
Phone:			VARSITY CADET:	Annual Pledge \$125.	00
E-Mail:			SUSTAINER:	Annual Pledge \$250.	00

H.O.M.E. PROJECT AND/OR ADDITIONAL MUSEUM DONATION	\$				
Make Separate Check Payable To: AXP Museum Fund	\$ (TOTAL)				
TOTAL FROM MEMBERSHIP (ABOVE)	\$				
Additional AXP Loyalty Fund Donation:	\$				
Reunion Banquet Tickets (6 and Under Free) \$20 Per Person	\$				
Make Separate Check Payable To: AXP Loyalty Fund	\$ (TOTAL)				
Mail Application and Payments to: AXP Membership 650 Wycliffe Drive Xenia, Ohio 45385					
Our Website for Online Payment: www.osso-ovch-axp.org					

OFFICE USE ONLY

Received on:	Entered in DB on:	Total:
Received by:	Entered by:	Check #