

# KEEPING IN TOUCH

We frequently get calls from graduates attempting to contact classmates.  
*We love hearing from you and helping you connect with your classmates!*

If you are willing to provide updated information, please complete the following:

## Your Information:

\_\_\_\_\_  
First Name                      Maiden Name                      Current Last Name

\_\_\_\_\_  
Graduation Year                      Home Phone                      Work Phone

\_\_\_\_\_  
E-mail Address                      Spouse Full Name

\_\_\_\_\_  
Mailing Address                      City, State, Zip

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
*Birthday (month, day, year)*

OK to print/share above     Please do not publish above

## Events in my life since graduation:

Work: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Family: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Church: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Interesting story/fact about me: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



*See reverse side for more reconnection opportunities.*

## **Sibling/s, Relatives and/or Friends Who Attended Our School/s:**

_____	_____	_____
First Name	Maiden Name	Current Last Name
_____	_____	_____
Graduation Year	Home Phone	Work Phone
_____	_____	
E-mail Address	Spouse Full Name	
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_____	_____	_____
First Name	Maiden Name	Current Last Name
_____	_____	_____
Graduation Year	Home Phone	Work Phone
_____	_____	
E-mail Address	Spouse Full Name	
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_____	_____	_____
First Name	Maiden Name	Current Last Name
_____	_____	_____
Graduation Year	Home Phone	Work Phone
_____	_____	
E-mail Address	Spouse Full Name	

### **Thanks for Sharing!**

**Please send me information about:**

- |  |   |
|--|---|
| <input type="radio"/> Reunions                       | <input type="radio"/> Alumni Christmas Mass |
| <input type="radio"/> Play performances              | <input type="radio"/> Golf Tournament       |
| <input type="radio"/> Fall wine tasting event        | <input type="radio"/> Volunteering          |
| <input type="radio"/> Valley Catholic Auction/Raffle |   |

I'd like to hear more about \_\_\_\_\_

**Please return this form to:** SSMO Foundation  
Attn: Alumni Relations Office  
4440 SW 148<sup>th</sup> Avenue  
Beaverton, OR 97007

**Questions/comments:** (503) 906-1145 or [alumni@ssmomministries.org](mailto:alumni@ssmomministries.org) [alumni.ssmofoundation.org](http://alumni.ssmofoundation.org)