



ALUMNI BUSINESS NETWORK

BUSINESS NETWORK MEMBERSHIP FORM LA VERNIA ALUMNI ASSOCIATION

Business Name: _____

Alumni Name: _____ Graduating Class: _____

Business Address: _____
City State Zip

Email Address: _____

Phone Number: _____ Business Profession: _____

Business Advertising Blurb:

Payment

Welcome to the Alumni Business Network. An annual donation of \$250 is asked of your business. With this donation, the Alumni Association will provide direct advertisement on our website to yours, include contact information on our website and recognize your businesses at social and networking events. Please see the different ways to pay below.

Check Number _____

Cash

Venmo @LaVerniaAlumni-Association



Please send payment and this form to: La Vernia Alumni Association | P.O. Box 1416 | La Vernia, TX 78121