



Sunshine High School Alumni Association Official Application Form

Name:

Address:

City:

State:

Zip Code:

Home Phone Number:

Work Phone Number:

Cell Phone Number:

E-mail Address:

Are you willing to serve on a SHSAA Committee? If yes, please circle which one would interest you the most.

Scholarship Committee Mentorship Committee Special Events Committee

Finance Committee Hospitality Committee Publicity Committee

Programs Committee Membership Committee Nomination Committee

Awards Committee

Please provide appropriate information and submit with initial registration fee of \$20 to Iberville Bank, Saint Gabriel Branch, Saint Gabriel, LA 70776, care of the Sunshine High School Alumni Association.

Faculty (Position/Curricular)

Staff (Position)

Student (Year of Graduation)

SHSAA recognizes the importance of protecting the privacy of all information provided by our members. We created the following policy guidelines with a fundamental respect for our members right to privacy to guide our organizational practices. This policy covers how SHSAA treats personal information that we obtain from you for your membership and or business with SHSAA. Personal information is information that is personally identifiable information like your name, address, email address, or phone number, and it is not otherwise publicly available. SHSAA does not rent, sell, or share personal information about you with nonaffiliated persons or organizations. We only provide membership information to members and for the purposes of SHSAA as an organization on your behalf.