



**ALUMNI ASSOCIATION of the LUTHERAN SCHOOL OF NURSING
in ST. LOUIS, MISSOURI MEMBERSHIP FORM**

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Year of graduation _____ Last name at graduation _____

Current name _____ Spouse _____

Address: Street _____ City _____ State _____ Zip _____

Home phone (____) _____ Cell phone (____) _____

E-mail address _____ @ _____

Membership Dues are due by May 31 Checks should be made out to ALUMNI LSN

Active Member Dues \$40 \$ _____

❖ **Life Membership** is conferred after 25 years of Active Membership.

***Note:** If you would like to pay your dues online, you may go to www.alumniLSN.org. Complete the membership form and submit dues. PayPal is the only form of payment accepted at this time. Any person renewing online must pay a vendor processing fee, which will be an additional \$1.75.*

Scholarship Fund for Alumni Members \$ _____

Unspecified Donation to the Alumni Association \$ _____

Note:

- *Dues & Contributions for scholarships are **not** deductible as charity on income tax returns. Alumni LSN is recognized by the IRS as a 501©(7) organization. A fraternal group organized for mutual benefit.*
- *If you would like to make contributions online, you may go to www.alumniLSN.org. Complete the membership form and submit. PayPal is the only form of payment accepted at this time. Any person making donations online must pay a minimum vendor processing fee, which will be an additional \$2.50.*