PERSONAL INFORMATION

FIRST NAME    MIDDLE NAME    LAST NAME    MAIDEN NAME

SPOUSE’S NAME

PREFERRED EMAIL    ALTERNATE EMAIL

PRIMARY PHONE    GRADUATION YEAR

YOUR ADDRESS

ADDRESS

ADDRESS LINE 2

CITY    STATE    ZIP CODE

COUNTRY

LEGACY INFO

(USE A SEPARATE FORM FOR EACH LEGACY. NO NEED TO DUPLICATE SECTIONS ABOVE.)

LEGACY FIRST NAME    MIDDLE NAME    LAST NAME    PREFERRED NAME

☐ PARENT    ☐ GRANDPARENT    ☐ GUARDIAN

YOUR RELATIONSHIP TO LEGACY

LEGACY BIRTHDAY (MM/DD/YY)

LEGACY ADDRESS

LEGACY ADDRESS LINE 2

LEGACY CITY    LEGACY STATE    LEGACY ZIP CODE

LEGACY COUNTRY

Return completed form(s) with $100 enrollment fee per Legacy to:

Baylor Alumni Network Legacy Program
One Bear Place #97340
Waco, TX 76798-7340

or

Register online at baylor.edu/alumni/legacy