



# BAYLOR UNIVERSITY

## 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](http://baylor.edu/alumni/legacy)