



ALUMNI ASSOCIATION - MEMBERSHIP APPLICATION

Membership is open to individuals who graduated from a degree or certificate program and/or former students who have completed 30 or more credits at Capital or one of its founding institutions. An official membership card will be forwarded to you.

Name _____
First Last Maiden

Home Address _____
Street City State Zip

Telephone: _____ Email: _____

Year of Graduation (if applicable) _____

Program of Study/Year(s) attended _____

Additional Education: _____

Your occupation: _____

Employer _____

Employer Address _____
Street City State Zip

Employer Telephone _____

Spouse/Partner name (if applicable): _____

Did your spouse/partner attend Capital or a founding institution? _____

Circle the address where you would like to be contacted: Home Work



MEMBERSHIP FEES

Check out our Memberships and see how you can help the Alumni Association by paying your membership fee to the Alumni Association.

If you interested in becoming a member but cannot afford any fee at this time, please contact the President at CA-AlumniAssoc@ccc.commnet.edu.

Yes, I want to support Capital Community College.

Enclosed is my:

_____Regular membership fee of \$20

_____My lifetime membership fee of \$100

Please send a check and completed registration form to CCCAA or register on-line using Pay Pal

*** Fees will be waived for this graduating class (2007 – 2008) for the first year only.**

Return To:
Capital Community College
Alumni Association
950 Main Street Hartford, CT 06103
Telephone: 860-906-5102 Fax: 860-906-5115
E-mail: CA-AlumniAssoc@ccc.commnet.edu