

CLASS OF 1967  
TRINITY UNIVERSITY  
50<sup>th</sup> Class Reunion

PERSONAL HISTORY (Please print/write legibly as this form will be placed in reunion book)

NAME:	First	(Maiden)	Last
STREET ADDRESS:			
CITY/STATE/ZIP:			
HOME PHONE: CELL PHONE:			
EMAIL ADDRESS:			
WEB PAGE:			
FACEBOOK NAME:			

DEGREES	YEAR	MAJOR	UNIVERSITY
			<b>TRINITY UNIVERSITY</b>

SPOUSE/PARTNER INFORMATION:

First	Maiden (If Attended Trinity)	Last
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DEGREES	YEAR	MAJOR	UNIVERSITY

**OTHER FAMILY INFORMATION:** *children, grandchildren, pets or a picture of "then & now"*

**YOUR LIFE AT TRINITY:** As you remember your time at Trinity, tell us about a particular person, event or experience that significantly influenced you. **Please share a story that has particular meaning for you.**

**LIFE AFTER TRINITY:** Work/Career/Profession - If retired, your occupation / employer prior to retirement

**PASSIONATE PURSUITS:** (hobbies, interests, commitments that are keeping you busy in this stage of life)

**GETTING TO KNOW YOU:** Share a book, play, movie, piece of music, painting, or other creative piece that is important to you. We'll put these on our "TO DO" lists.

**50<sup>TH</sup> CLASS OF 1967 REUNION:** Friday, October 13 – Sunday, October 15, 2017  
Are you coming for our reunion?  
If so, please register online at: [www.trinity.edu/alumniweekend](http://www.trinity.edu/alumniweekend)

Return to Alumni Relations, Trinity University,  
323 Stadium Drive, San Antonio, TX 78212 or  
by e-mail to [alumni@trinity.edu](mailto:alumni@trinity.edu)  
**Deadline is Friday, September 29.**