



OLPH School Alumni Registration Form

Title: Mr. Mrs. Ms. Miss Dr.

Last Name: _____

First Name: _____

Maiden Name: _____

Year Graduated OLPH School: _____

Mailing Address: _____

City: _____ **State:** _____ **Zip:** _____

Email Address: _____

Would you like to receive mail or email from OLPH School? Yes No

Please share a favorite memory of your days at OLPH School:

Please share some of your accomplishments since leaving OLPH School:

Please share how attending OLPH School positively impacted your life:

Please print and mail this form or email it to:

OLPH School
23225 Lyons Ave
Santa Clarita, CA 91321

principal@olphsc.org

Like us on  : Our Lady of Perpetual Help SC Official Alumni