

BRADFORD AREA HIGH SCHOOL/BRADFORD CENTRAL CHRISTIAN
CLASS OF 1986
TWENTY YEAR CLASS REUNION

UPDATE FORM

Name: _____
(female classmates please include your maiden name)

Address: _____

E-mail: _____

Occupation: _____

Spouse's Name: _____

Spouse's Occupation: _____

Children & DOB: _____

Education: _____

Awards & Honors: _____

Community Activities: _____

Other Information: _____

Please complete this form and return it with your reservation form. If you are unable to attend the Reunion we would greatly appreciate it if you would complete and return the form to us so that we can update your information to make it easier for us to find you for the next reunion. Thank you!