



OMA Foundation

Membership Information and Survey

Date _____

Name _____

Attended Name _____

Nickname _____

Association Alumnus/a
 Attended
 Parent
 Friend

Class Year _____

Years You Attended OMA _____

Year You Graduated _____

If not OMA, where did you graduate? _____

Email address _____

Mailing Address _____

City _____ State _____ Zip Code _____

Home Phone _____

Contact Information of someone who can always get in touch with you

Education Information

Did you go on to receive an undergraduate degree from a 4 year institution? _____

If yes, from what institution did you receive your undergraduate degree?

If yes, what was your major or main curriculum? (Arts and Science, Business, Education, Engineering or Other) _____

Did you go on to receive an advanced degree? _____

If yes, from what institution did you receive your advanced degree?

If yes, what degree did you receive?

Business Information

Title _____

Company Name _____

Business Address _____

City _____ State _____ Zip Code _____

Business Phone _____

Fax Number _____

Email Address _____

Family Information

Spouse Name _____

Spouse Nickname _____

Spouse Class Year _____

Did your spouse graduate from OMA? _____

Children's Name(s) _____

Update _____

Best Memories of OMA _____

Please list family members and friends who you keep in touch with that would like to keep in touch with Oak Mountain Academy. _____

Please list any of your classmates who you know that are deceased _____

Would you like to receive postal mailings from the OMA Foundation and Oak Mountain Academy? ___ Yes ___ No

Would you like to receive emails from the OMA Foundation and Oak Mountain Academy? ___ Yes ___ No

Would you like to serve on the OMA Foundation Board of Directors or other committees? ___ Yes ___ No

I/We are interested in information on:

- OMA Foundation Renovation Project
- Oak Mountain Classis Dog and Horse Show
- OMA Annual Fund
- OMA Athletic Booster Club
- Reunion Planning

Please send admission information to the following family:

Name _____

Address _____

City _____ State _____ Zip Code _____

Suggestions:
