



BE A PART OF OUR HISTORIC BEGINNING

CONTACT INFORMATION

NAME _____

ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

PHONE _____ EMAIL _____

DID YOU PLAY AT SOUTHEASTERN? Y N

YEARS PLAYED _____ SPORTS PLAYED _____

MEMBERSHIP

LEVEL: BLUE GOLD ALL-CONFERENCE ALL-AMERICAN HALL OF FAME

PAYMENT

PAYMENT TYPE: CHECK CREDIT CARD VISA MASTERCARD AMERICAN EXPRESS

WOULD YOU LIKE TO DONATE MORE MONEY? Y N AMOUNT _____

NAME ON CREDIT CARD _____ CREDIT CARD NUMBER _____

EXPIRATION DATE _____ CVV NUMBER (ON BACK OF CARD) _____

SIGNATURE _____

PLEASE SEND TO:
SE ATHLETIC ASSOCIATION • 1405 N. FOURTH AVE., PMB 4108 • DURANT, OK 74701-0609