



## ALUMNI ASSOCIATION REGISTRATION

St. Peter Catholic School  
130 East Temperance Street  
Covington, Louisiana 70433  
985-892-1831 Fax: 985-898-2185

First name: \_\_\_\_\_ Last name: \_\_\_\_\_

Maiden name if applicable: \_\_\_\_\_

Current address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

What year did you graduate from St. Peter Catholic School? \_\_\_\_\_

Home telephone: \_\_\_\_\_ Work telephone: \_\_\_\_\_

Cell phone number: \_\_\_\_\_ Email address: \_\_\_\_\_

Employer: \_\_\_\_\_

Spouse's name/Occupation: \_\_\_\_\_

Child(ren)'s name(s)/Ages: \_\_\_\_\_

High school attended: \_\_\_\_\_ Year graduated: \_\_\_\_\_

College attended: \_\_\_\_\_ Year graduated: \_\_\_\_\_

Post-college education: \_\_\_\_\_

Special news I would like to share with other St. Peter alumni via the Alumni Newsletter:

Please check all that apply:

- Yes, I would like to receive emails about future Alumni events
- Yes, I would like to receive the Alumni Newsletter
- Yes, I would like to volunteer to help with the Alumni Association

For further alumni information, contact Karen Van Zandt, Advancement Director,  
St. Peter Catholic School [kvanzandt@stpetercov.org](mailto:kvanzandt@stpetercov.org)