



HOFSTRA UNIVERSITY®

ALUMNI ORGANIZATION INFORMATION REQUEST FORM
Affinity Group Formation

NAME OF INTEREST GROUP _____

NAME _____

YEAR OF GRADUATION _____

ADDRESS _____

CITY, STATE, ZIP _____

TELEPHONE NUMBER (H) _____ (B) _____

EMAIL ADDRESS _____

BUSINESS NAME _____

BUSINESS TITLE/POSITION _____

BUSINESS ADDRESS _____

HU700# _____ DEGREE(S) _____

VARSITY SPORTS PLAYED AT HOFSTRA _____

CLUBS/STUDENT GROUPS PARTICIPATED IN AT HOFSTRA _____

NAME OF SPOUSE _____

IF ALUMNUS, YEAR OF GRADUATION _____

MY HOME/BUSINESS ADDRESS INFORMATION HAS CHANGED WITHIN THE LAST YEAR

YES! Sign me up for my free subscription to **AlumNet**, Hofstra's monthly e-newsletter that shares Alumni highlights throughout the year. Please use this e-mail address:

By signing below, I indicate my interest and support of the establishment of the aforementioned group.

Signature:

Date:

Libby and Joseph G. Shapiro Alumni House | Attn: Jacqueline Carlson
150 Hofstra University | Hempstead, NY 11549-1500
Phone: (516) 463-6636 | Fax: (516) 463-5897 | E-mail: Jacqueline.carlson@hofstra.edu