

Illinois High School Shrine Game Alumni Association

Please fill out online or print your information below.

Last Name: _____ First Name: _____

Spouse's Name: _____

Children: _____

Street Address: _____

City/Town: _____ State: _____ Zip: _____

Telephone: _____ E-mail: _____

High School: _____

Occupation: _____

Year participated in Shrine Game: _____

Please fill out online at www.ilshrinegame.com or return this form to:

Illinois High School Shrine Game

612 Falcon Dr.

Gibson City, IL 60936

For more information about the Shrine Game Alumni Association, contact Eric
Tjarks at ilshrinegame@gmail.com