



Alumni Registration

As an alumna/us of Bladen Community College we would like to add you to our Alumni mailing list. Please complete the form below.

Full name: _____

Student ID# _____ Graduation year: _____

Current mailing address: _____

Current phone number: _____

Email address (Not your college email): _____

Would you like to serve on the Alumni Committee? Yes _____ No _____

Do you want to be added to our newsletter mailing list? Yes _____ No _____