**Dromore High Past Pupil Association Registration Form**

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| NAME |  |
| LEAVER YEAR |  |
| I am interested in keeping in contact with the school through an Alumni group | YES/NO |
| PATHWAY ON LEAVING DROMORE HIGH |  |
| FURTHER QUALIFICATION PATHWAYS if relevant |  |
| PRESENT HOME ADDRESS |  |
| PRESENT POSITION |  |
| CONTACT DETAILS  e.g Mobile number  Email address |  |
| Any further information you are willing to share with us regarding experience in your career area which may be useful to present students. |  |