



**THE ASSOCIATED ALUMNI
OF CENTRAL HIGH SCHOOL**

Incorporated 1873

**THE ASSOCIATED ALUMNI OF CENTRAL HIGH SCHOOL
AUDITORIUM SEAT DEDICATION**

Name of Applicant _____ Class _____

Address _____

City _____ State _____ Zip _____

Email _____ Phone _____

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INSCRIPTION - Maximum 3 lines; 30 characters per line, includes spaces.

Single seats, multiple seats and full rows are available. Rows: groups of 9-23 seats.

Dedication Donation: **\$300 per seat**

Please make checks payable to:

AACHS

PO BOX 26580

Philadelphia, PA 19141

Or online: <https://centralhighalumni.com/auditorium-seat-dedication-2/>