

The Stinesville Alumni Banquet will be held on Saturday, June 6th, 2026, at the Stinesville Government and Community Center, formally Stinesville High and Elementary School. This year will mark the 93rd anniversary of the banquet.

Each year, two scholarships are presented to graduating Edgewood High School Seniors by our Alumni. Contributions to this fund will be greatly appreciated and may be enclosed with your reservations. Please help us keep this tradition alive by joining in our efforts. We will also honor the oldest graduate in attendance.

We would also like to have you celebrate the fire department as this year marks and “End of an Era” for the Bean Blossom Township Stinesville Fire Department. December 31, 2026, will be the last day that we operate as Bean Blossom Twp. Stinesville Fire Department, marking 70 years of service. 1956-2026. Beginning January 1, 2027, the oldest all volunteer department in Monroe County will become Monroe Fire Protection District and will be a paid, staffed station. For the 2027 banquet, the community center and park board will take over the preparations for the alumni banquet. Please help us celebrate our volunteers that have protected and served the Town of Stinesville and Bean Blossom Township for the past 70 years.

Doors will open at 5:30 p.m. and the meal will be served at 6:30 p.m. The cost of the meal is \$20.00 per person. The meal will be prepared and served by the Stinesville Fire Department. This year’s meal will consist of Ham, Mashed Potatoes, Green Beans, Salad, Roll & Butter, Coffee, Tea and Water. Cake for dessert. Door prizes will be given after the meeting announcements.

We ask that you contact your classmates and encourage them to attend. We do not have everyone’s addresses as they were not passed along to us.

Please fill out the information below and return this form:

Reservations and payment must be received no later than May 15th. If you have any questions, please feel free to contact us at:

stinesvillealumni@gmail.com

Mail your reservation to P.O. Box 405, Stinesville, IN 47464.

NAME: _____

ADDRESS OR EMAIL: _____

GRADUATION YEAR _____

YEARS ATTENDED: _____

NUMBER ATTENDING: _____

\$20 PER PERSON / AMOUNT ENCLOSED: _____

SCHOLARSHIP FUND: \$ _____

Make Checks Payable to: Stinesville Fire Department