



UA Black Alumni Club Annual Membership Form

(PLEASE PRINT)

Membership through December 31 of application year

Date: _____

Name

Address

City State Zip Code

Email Telephone (*Please include area code*)

- Full Membership**\$15.00* (full voting rights, former students who have received a UA degree or have completed *at least 30 credit hours*)
- Associate Membership** ...\$10.00* (open to anyone, no voting rights)
- Student Membership**\$5.00* (open to current or former UA students who have completed *fewer than 30 credit hours, no voting rights*)

I would like to make a tax deductible donation* to:

- UABA unrestricted funds for programs and services \$ _____
- UABA Alumni Scholarship Endowment Fund \$ _____
- Dr. Glenn Smith Emergency Grant \$ _____
- Fred Snowden Memorial Scholarship \$ _____
- Dr. Felix Goodwin Memorial Scholarship \$ _____
- Johnny W. Zander Memorial Scholarship Fund \$ _____

Payment methods

Check: *made payable to UAF/UA Black Alumni*

Credit Card: Visa MasterCard American Express Total to be charged: \$ _____

You may fax this completed form for **credit card** payments to (520) 621-9030.

Signature (for credit card transaction): _____

Credit Card number: _____

Expiration date: _____ V#: _____

Please note: Cardholder's name, address, and zip code above must be exactly the same as it appears on your credit card billing statement. V#--Visa/MasterCard: last 3 digits of the number on back; American Express: 4-digit number on front.

Payments should be mailed to: UAF/UA Black Alumni
 1111 N Cherry Avenue, Tucson, Arizona 85721-0109
 (520) 850-1735 - uaba@al.arizona.edu - <http://www.ArizonaAlumni.com/uaba>
 *Membership fees and donations are tax-deductible.