

Membership Application

Real Life Program Application

IAF

Dance Marathon Alumni Interest Group

Please complete and return to the address below

Membership Category (choose one only)

Annual Membership

- Individual \$50
- Joint (two persons at same address) \$60
- Family (parents plus one current Penn State student) \$45

Life Membership

- Individual (single payment) \$600
 - or monthly payment, 20 months \$30*
 - Joint (single payment) \$750
 - or monthly payment, 25 months \$30*
 - Age 60+ single payment (single or joint) \$300
 - or monthly payment, 20 months \$15*
 - Second person at same address, single payment \$150**
 - or monthly payment, 25 months \$6*
- * At 0% interest, Electronic Funds Transfer (EFT) is a great way to pay off your life membership with a monthly, automatic checking account deduction plan.
- ** Check only when second person is being added to an existing life membership.

Billing Information (choose one only)

Pay by Check

I have enclosed a check, payable to:
"Penn State Alumni Association"

Pay by Credit Card

Charge to: MasterCard Visa Discover American Express

Card number: _____

Exp. date: _____

Name as it appears on card: _____

Pay by Electronic Funds Transfer (EFT)

If you would like to use EFT to spread out your life membership payments over time at 0% interest, simply:

1. Complete this **membership application** and return it to the address below. This information enables us to activate your membership.
2. **Sign here** to authorize the Penn State Alumni Association to instruct your bank or savings institution to make the appropriate deductions from the account you indicate.

Signature: _____

3. Send a **voided check** with this application to provide the account data needed to set up the process with your bank or savings institution. **Please do not send a check for \$30.00.**

Personal Information (required)

Name: (Ms./Mr./Mrs.) _____

First

Middle

Last

Penn State ID: 9- _____

Street address: _____

City: _____

State: _____

Zip: _____

Are you a Penn State alum or friend alum friend?

If an alum, class year or years attended (required): _____

Home phone: () _____

Business phone: () _____

E-mail: _____

Spouse/Partner Information (required for joint memberships)

Name: (Ms./Mr./Mrs.) _____

First

Middle

Last

Is this person your spouse partner?

Is this person a Penn State alum friend?

If an alum, class year or years attended: _____

Penn State Student Information (required for family memberships)

Name: (Ms./Mr./Mrs.) _____

First

Middle

Last

Penn State ID: 9- _____

Mail completed application to:

Penn State Alumni Association
Hintz Family Alumni Center
Department B, University Park, PA 16802
Or fax to:
814-865-7089



Penn State
Alumni Association