

Primary family member _____ Non-Alum Alum Year _____ Fee \$ _____
If primary member is under 19 years of age, state date-of-birth _____

Address _____

Phones: Home _____
Work _____

E-mail Address _____

First additional member _____ Fee \$ _____
(birthdate, if child)

Additional members _____ Fee \$ _____
(under 19) (name) (birthdate)

_____ Fee \$ _____
(name) (birthdate)

_____ Fee \$ _____
(name) (birthdate)

Additional members _____ Fee \$ _____
(over 19) (name) (birthdate)

State name of college if qualifying for lower rate _____

Services (optional) Fee \$ _____

Effective 1/1/00

TOTAL ENCLOSED \$ _____