



LSU ALUMNI DALLAS CHAPTER
 14902 Preston Rd., Ste 404-124
 Dallas, TX 75254

LSU/ DALLAS ALUMNI MEMBERSHIP APPLICATION FORM

Please provide all information requested.

Member's Name	<u>Last</u>	<u>First</u>
Spouse's Name	<u>Last</u>	<u>First</u>
Address	<u>PO Box</u>	
	<u>City</u>	<u>ST</u> <u>Zip</u>
Phone	<u>Home</u>	<u>Cell</u>
Email Address:	<u>Member</u>	<u>Spouse</u>
Member's Employer	<u>Office Phone</u>	
Spouse's Employer	<u>Office Phone</u>	
Calendar Years at LSU	<u>Major or Degree</u>	

Networking Information: **CAN USE** **CAN NOT USE**

Please don't include my information in the membership directory

Check One	<input type="checkbox"/>	New Individual Member (\$25)	<input type="checkbox"/>	Renew Individual Member (\$25)
	<input type="checkbox"/>	New Family Member (\$35)	<input type="checkbox"/>	Renew Family Member (\$35)
Payment Type:	<input type="checkbox"/>	Check # <input type="text"/>	<input type="checkbox"/>	Cash
			<input type="checkbox"/>	Credit Card

You may register on line at www.lsualumnidallas.com and pay with Pay Pal

Our chapter holds a number of activities throughout the year. Please indicate if you would be interested in helping with in the following events:

<input type="checkbox"/> Membership recruiting	<input type="checkbox"/> High School Academic Nights
<input type="checkbox"/> Crawfish Boil	<input type="checkbox"/> Alumni Banquet
<input type="checkbox"/> Football / Sport Watching Party	<input type="checkbox"/> Alumni Newsletter
<input type="checkbox"/> Membership directory	<input type="checkbox"/> Website

Membership entitles you to discounted member admission price to all chapter functions.
 Married members may extend discounted member admission prices to spouse and all dependent children under 18.
 Single members may extend discounted member admission prices to a date or guest.

Please mail this form and a check (payable to LSU Alumni Dallas) to
LSU Alumni Association
 14902 Preston Rd., Ste 404-124
 Dallas, TX 75254

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	Units	Description	Unit Price	Total
		Individual Membership	\$25.00	
		Family Membership	\$35.00	
			Total Due	\$

Pay with a Credit Card **Visa** **MC** **AMEX** **Discover** (circle one)

Name on Card _____ **Telephone:** _____

Card # _____ **Expiration** _____ **Code** _____

Address _____ **Zip** _____

Signature _____

Please provide all information requested.