



**PennState  
Alumni Association**  
Triangle Chapter

# MEMBERSHIP FORM

## JULY 2019 - JUNE 2020

**Annual Family Membership Dues Are Fifteen Dollars (\$15).**  
You may also include a donation to the Chapter's endowed scholarship fund with your payment.

Check here if you are a current PSU student (free membership for students): \_\_\_\_\_  
Check here if you graduated from PSU in the past year (one year free membership): \_\_\_\_\_

NAME (FIRST, M.I., LAST) \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

EMAIL ADDRESS(ES) \_\_\_\_\_

PREFERRED PHONE NUMBER \_\_\_\_\_ CIRCLE: (Home)/(Work)/(Cell)

EMPLOYER \_\_\_\_\_

CLASS YEAR/DEGREE/MAJOR (e.g. 1988/B.S., Bio) \_\_\_\_\_

SPOUSE'S NAME (FIRST, M.I., LAST) \_\_\_\_\_  
SPOUSE'S EMPLOYER \_\_\_\_\_  
SPOUSE'S ALMA MATER \_\_\_\_\_ CLASS YEAR/DEGREE/MAJOR \_\_\_\_\_

Are you a member of the national Penn State Alumni Association? YES / NO

Are you interested in attending Board meetings or volunteering your time for the Chapter? YES / NO

What activities would you like to see the Chapter organize? \_\_\_\_\_

Please make all checks payable to "Triangle Penn State Chapter" and mail with this form to:  
Triangle Penn State Chapter  
Attn:Membership  
P.O. Box 1215  
Morrisville, N.C. 27560-1215

**FOR CHAPTER USE ONLY:**

Check No./Cash/CC	Check/CC Name	Date Received	Amount	Chapter Representative
_____	_____	_____	_____	_____