



PATRON MEMBERSHIP APPLICATION

PATRON ID# _____

OFFICE USE ONLY

PATRON DESIGNATION

BR: _____

Please Print

Mr. Mrs. Ms.

NAME _____ SPOUSE _____

ADDRESS (Preferred) _____

CITY _____ STATE _____ ZIP _____

PHONE(H) _____ PHONE(O) _____

SOCIAL SECURITY # _____ - _____ - _____

Paid By: Donor's Check MC/VISA/AMEX (See authorization below)

MC/VISA/AMEX
CARD# _____ EXP. DATE _____

ACCT NAME _____ PAYMENT AMOUNT _____

SIGNATURE _____ DATE _____

EMPLOYER _____ TITLE _____

One-time opportunity for \$20.00 membership fee. TLR: _____

DATE: _____

MAKE CHECKS PAYABLE TO:

The University of Texas

30-6269-2493

A-1701

OFFICE USE ONLY

UFCU (03A)