



MEMBERSHIP & INFORMATION FORM

Name:

Address:

City:

State:

ZIP Code:

Phone:

Email:

Current employer:

Title/ Position:

TENNESEE STATE UNIVERSITY AFFILIATION

Undergraduate Major:

Grad. Year:

Undergraduate School (If not TSU):

Graduate Major:

Grad. Year:

Graduate School (If not TSU):

MEMBERSHIP DUES

- \$35.00 - Local Chapter Dues
- \$30.00 - National Alumni Chapter (it is preferred to pay directly here: [TSUNAA Dues Payment](#))

I would like to contribute an additional amount of \$ _____ for the Scholarship Fund

Please make check payable to *TSU Cincinnati Alumni Chapter*

Mailing Address: *TSU Cincinnati Alumni Chapter, PO Box 24280 Cincinnati, OH 45224*

Office Use Only

Fiscal Year

Date

Total Remittance: \$

Cash/Check