

Membership Application
Southern University Alumni Federation
P.O. Box 9746
Baton Rouge, Louisiana 70813

Office: (225) 771-4200
Fax: (225) 771-5360
email: info@sualumni.org
URL: WWW.SUALUMNI.ORG

Check where applicable: New Member Dues - \$50.00 ()	Renewal ()
Life Membership Payment/installment ()	Address/phone change ()
Name change ()	Employment change ()
Other _____ ()	Friends & Supporters ()

Personal Information: (please print or type)

Last Name	First	Mi	Maiden Name
>			
Date of Birth:			
> MO _____ DAY _____ YEAR _____			
Address (Home or Mailing):			
Street		Apt.#	
>			
City		State	Zip+4
>			
Home Phone:		Private #: NO/YES	Business/Office Phone/Email:
>			
Spouse's Name		SU Grad: NO/YES	Number of Children
>			
Employer		Position/Profession	
>			
Company Sponsored Membership		Will Your Company Participate in a Matching Gifts Program (no/yes)	
>			

Statistical Information:

Annual Leave/Vacation Time/Days: Salary Range: \$0-24K() \$25-40K() \$40-50K() \$50-74K() \$75K+()				
Educational Information				
College/Department:		Major/Minor		
>				
Degree		Non Graduate – Please Explain		
>				
SU Class of _____ FALL/SPRING/SUMMER		Dates Attended: MM/YYYY TO MM/YYYY		
>				
Graduate School / Professional Certifications:		Degree/ Certification and Year:		
>				
Hobbies / Interests:				
>				
Chapter Affiliation:				
>				

Dues Payment Options:

National Membership Dues (\$50) – ()	Note: National Dues are paid per fiscal year (July 1 - June 30)		
National Life Dues (\$500) – () \$ _____	Life Membership Levels (indicate full or partial payment amount)		
Sapphire Pin (\$1000) – () \$ _____	Ruby Pin (\$500) – () \$ _____		
	Diamond Pin (\$5000) – () \$ _____		
Pay by Check () Money Order () or			
Pay by Credit/Debit Card: Visa() MasterCard() American Express() Discover() Other() _____			
Card Number:	Name on Card:	Date of Exp:	
>>>>	>>>>	>>>>	
Address of Card:		Phone:	
>>>>		>>>>	

For Office Use Only

Check Number _____ **Date Posted** _____ **Life Membership Balance Due \$** _____