HUAA
Howard University Alumni Association
Howard University Alumni Club of Westchester and Rockland

Membership Application

Information

Name	
Address	
City, State, Zip	
Home Phone	
Cell Phone	
E-Mail	
School/College	
Graduation Year	
Profession and/or Title	
Birthday (dd/mm)	

Membership Level

Please check all that apply?

___ New Membership
___ Renewal
___ Information Update

___ $70 (1-year Regular Membership)
___ $70 (1-year Associate Membership)
___ $35 (1-year Regular Membership, 2011 Graduate)
___ $____ (Donation to HUACWR)

Interests

Please indicate the areas in which you are interested in getting involved?

___ Event Planning
___ Student Recruitment
___ Membership Drives
___ Fundraising
___ Other _____

Please mail your completed application and check payable to HUACWR to: Howard University Alumni Club of Westchester and Rockland, Attn: Membership Committee, P.O. Box 71, White Plains, NY 10603. Thank you for supporting HUACWR!

Administrative Use Only Date Processed:_____ Promotion Code:_____