

KENT STATE
UNIVERSITY
ALUMNI ASSOCIATION



Name _____

Address _____

City _____ State _____ Zip _____

E-mail _____ Telephone _____

Membership Options	Single	Joint*
<input type="checkbox"/> Annual	\$35	\$50
<input type="checkbox"/> Three Year	\$95	\$135
<input type="checkbox"/> Life	\$500	\$600
<input type="checkbox"/> Life Installment	\$500 (5 years at \$100)	\$600 (6 years at \$100)
<input type="checkbox"/> Senior Life (age 62+)	\$250	\$300
<input type="checkbox"/> New Graduate (within last 12 mo.)	\$25	

Payment Options

- Check (Payable to KSUAA)
 MasterCard
 Visa
 American Express
 Discover

Total Amount \$ _____

Account Number _____ Expiration Date _____

Signature _____

*Joint Member Name _____

Mail to:
Kent State University Alumni Association
PO Box 5190
Kent, OH 44242-0001