



PATRON MEMBERSHIP APPLICATION

PATRON ID# _____

OFFICE USE ONLY

PATRON DESIGNATION

BR: _____

Please Print

☐ Mr. ☐ Mrs. ☐ Ms.

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

NAME _____ SPOUSE _____

ADDRESS (Preferred) _____

DATE: _____

CITY _____ STATE _____ ZIP _____

MAKE CHECKS PAYABLE TO:
The University of Texas

PHONE(H) _____ PHONE(O) _____

SOCIAL SECURITY # _____ - _____ - _____

30-6269-2493
A-1701

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 _____

OFFICE USE ONLY

UFCU (03A)