

# Mortar Board Alumni Association



## ***I. Contact information***

First name: \_\_\_\_\_ Maiden name: \_\_\_\_\_ Last name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
Email address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Undergraduate institution: \_\_\_\_\_ Initiation year: \_\_\_\_\_

## ***II. Contact information of joint member, if applicable***

First name: \_\_\_\_\_ Maiden name: \_\_\_\_\_ Last name: \_\_\_\_\_  
Email address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Undergraduate institution: \_\_\_\_\_ Initiation year: \_\_\_\_\_

## ***III. Payment information - Please select one option below.***

- Enclosed please find my check for \$45 for a single annual membership in the Mortar Board Alumni Association made payable to Mortar Board, Inc.
- Enclosed please find our check for \$65 for a joint annual membership in the Mortar Board Alumni Association made payable to Mortar Board, Inc.
- Enclosed please find my check for \$600 for a single lifetime membership in the Mortar Board Alumni Association made payable to Mortar Board, Inc.
- Enclosed please find our check for \$850 for joint lifetime membership in the Mortar Board Alumni Association made payable to Mortar Board, Inc.
- I will contact the Mortar Board National Office to discuss lifetime membership payment plan options. Please call 800-989-6266 or email [mortarboard@mortarboard.org](mailto:mortarboard@mortarboard.org)

## ***IV. Signature and acceptance***

By signing below, I/we accept the offer to become a charter member of the Mortar Board Alumni Association.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

*Joint member, if applicable*

## **Mail completed form and check to:**

Mortar Board National Office  
1200 Chambers Road, Suite 201  
Columbus, OH 43212