

Spingarn Alumni Association, Inc.
P.O . Box 31173 * Washington, D.C. 20030-1173
Membership Application/Renewal Form

| | | |
|--|--------------|--------------------|
| Date _____ | G New | G Renewal |
| Name _____ | | |
| Last | First | Middle |
| Maiden | | |
| Address _____ | | |
| City State Zip Code _____ | | |
| Home Phone _____ | | Office Phone _____ |
| Cell Phone: _____ | | Fax: _____ |
| Birthday _____ | | |
| Month | Date | Year |
| Email Address _____ | | |
| If former student, what is your graduating class? _____ | | |
| If former faculty, what year(s) did you serve? _____ | | |
| Spingarn Alumnus or Friend of Spingarn: | | |
| One year (\$40) | \$ | _____ |
| Two years (\$65) | \$ | _____ |
| Three years (\$90) | \$ | _____ |
| Spingarn Alumnus or Friend of Spingarn and Spouse: | | |
| One year (\$60) | \$ | _____ |
| Two years (\$110) | \$ | _____ |
| Three years (\$155) | \$ | _____ |
| Currently Enrolled Student: | | |
| One year (\$10) | \$ | _____ |
| Four years (\$30) | \$ | _____ |
| Donations: | | |
| Dr. Purvis J. Williams Scholarship . . | \$ | _____ |
| Other Donation | \$ | _____ |
| Total Remittance | \$ | _____ |

We need your help!

Sign up with eScrip and you can earn funds for the Spingarn Alumni Association.

Sign up online. It's quick and easy!

eScrip works with merchant partners to contribute to groups like ours each time you shop - at no cost to you!

Submit the following information. If information is the same as on your membership application/renewal form above, just provide your safeway card no.

Name _____

Mailing address _____

Phone number _____

E-mail address _____

Safeway card No. _____

It's Easy! It's Free! It's Powerful!