

MEMBERSHIP & SCHOLARSHIP FORM

Santa Cruz, CA 95064

☐ Renewal ☐ New ☐ If New, it is customar well as in the quarter	•					bers on our website a
Name:	•	-	•			
Mailing Address:					State:	Zip:
Telephone: Cell						
Job Title/Unit at Retirement:						
UC Campus/Lab Affiliation, if not UCSC:_						
For Dual Membership Only: Spouse/Partn						
Spouse/Partner UCSC Affiliation:						□ None
If UCSC retiree: Job Title/Unit at l	Retiremen	t		/		Year:
PAYMENT INFORMATION 1. Membership contribution (Please check on Annual membership (begins when payment is OR	processed)				`	
Life	time membe	ership		□ \$150 Sir	ngle 🗆 \$200 D	ual (<i>CH014F</i>)
2. Optional UCSC Retirees Association sch	holarship	contribu	tion(s):			
Silver Slug Staff Scholarship for curre at UC Santa Cruz				_	•	(SS006ENDF)
UCSC Retirees Association Bruce Lan	e Memoria	ıl Schola	rships for	r military	veteran student	S
For awards to be given this year	□ \$100	□ \$50	□ \$25	□ \$10	☐ Other \$	(F1005F)
For the scholarship endowment fund	□ \$100	□ \$50	□ \$25	□ \$10	☐ Other \$	(CH007ENDF)
3. Total amount of contribution (members ☐ Enclosed is my check (made payable to t)		
☐ Please charge to my: ☐ American Exp	oress \square	Discover	☐ Mas	ter Card	□ Visa	
Credit Card #:				Exp:	/	
Signature:					Date	
Mail completed application with payment or	payment ii	nformatio	on to:			
UCSC Retirees Association MS: University Advancement 1156 High Street						

SOL CODE: 4FG022422RAMSG 2024v1

^{*} All gifts are tax-deductible as prescribed by law. Please consult with your tax advisor if you have any questions regarding the allowable deduction. No goods or services will be provided to you for your donation.