

Application for Membership The Ida and Cecil Green Faculty Club at UCSD

UNIVERSITY OF CALIFORNIA, SAN DIEGO LA JOLLA, CA 92093-0121 **PH: (858) 534-0876**

Instructions: You may use the PRINT feature of your Web Browser to create a copy of this form. Mail the completed application to the address above. **Do not fax** as it contains personal information about your method of payment. By including your signature on this form or by making payment by check, it is understood that you agree to abide to the By-Laws, Rules, and Regulations of the Faculty Club.

Full Name:		_
,	elect Payroll Deduction for payment of dues	
University Title: (please circle one)		
FacultyStaffAlumniRetiredCommunity	 Grad Student Post Doc Temporary Other (specify)	
E-mail Address:		
Department:	Mail Code:	
Home Address:		
Telephone Numbers: Office: ()	Home: <u>(</u>)	
Cell: ()		
Initiation Fee		
Members pay a one-time fee of \$200 6 months with the university).	(or \$100 for new Faculty/Staff/Alumni/Gradu	uate Students/Post Doc in their first
Please Circle One:		

- Promotion: Fee Reduced now \$100 limited offer:
- Community One-time Member fee reduced from \$200 to \$100 $\,$
- Promotion: Fee Reduced now \$50 limited offer: Fee as new Faculty/Staff/Graduate Student/Alumni reduced from \$100 to \$50
- \$25 Temporary Academic Visitor (3 to 9 months)

Monthly Dues

Single Membership

- Active \$14.00 (Faculty/Staff/Graduate Students/Alumni/Post Doc)
- Retired \$10.00
- Community \$16.00

Application for Membership - The Ida and Cecil Green Faculty

Family Membership (allows second card for family member)

- Active \$16.00 (Faculty/Staff/Graduate Students/Alumni/Post Doc)
- Retired \$12.00
- Community \$18.00

Methods of Payment (please circle one)

- Payroll Deduction
- Credit Card
- Check

Payment Information

Dues are billed to each member's account semiannually, in **January** and **July**, or prorated if appropriate. Members who elect payroll deduction will have their dues deducted monthly. Please fill out the section below which corresponds to your preferred method of payment.

Payroll Deduction:

Monthly Payroll Deduction of dues is available for members on Regental payroll. Please provide the authorization information below and return it along with a check for your first month's dues to the Faculty Club.

	AUTHORIZATI	ON TO WITHHOLD	MEMBERSHIP DUES	
CANCEL PAYROI	SINGLE TO FAMIL			
Please type or Print:				
Employee's Name <u>:</u>			510.05	<u> </u>
	LAST	MIDDLE	FIRST	
dues established by the writing, and I authorize organization. I understan	Faculty Club which the remittance of the d that this deduction	are to be withheld fr nat amount to the of n is subject to condi	ual to the monthly membership from my wages until revoked in fficial designated by the itions set forth by the Regents. Date:	
After con	npleting, return th	is form to the Fac	culty Club, Mail Code 0121	
The following information	n is for office use	only:		
DEDUCTIONS TO BEGIN FOR	THE MONTH OF	, 20		
Employee No	ll Elen	nent No. 082 Dedu	uction Amount \$	-

If You Elect Payment by Debit or Credit Card: Please return the authorization below to the faculty club with the rest of your membership information.

 Master Card 		
• Visa		
 American Express 		
Card#		
Name on Card:		
Signature:	Date:	
	Please return the following form with your check to the Faculty	Club. Pleas
I Select Payment by Check: Pound of the UCSD Facu		Club. Pleas
checks payable to the UCSD Facu		
checks payable to the UCSD Facu	r the following to begin my membership at the UCSD Facu	
I have enclosed a payment for	r the following to begin my membership at the UCSD Facu	
I have enclosed a payment for Initiation Fee \$ First Month Dues \$	r the following to begin my membership at the UCSD Facu (If electing Payroll Deduction)	
I have enclosed a payment for	r the following to begin my membership at the UCSD Facu (If electing Payroll Deduction)	