

Taft Alumni Association
Membership Application

Please tell us as much about yourself as you like so that we can share your news in the newsletter's *Class Notes*.
Only fields marked with an asterisk (*) are required for membership. We will not publish your address or phone number.

*First Name (PLEASE PRINT)	* Last Name at Graduation	* Current Last Name	
*Home Street Address	*City	*State	*ZIP
Home Phone	Email Address		
*Month/Year You Graduated	Name of Spouse		Year Married
Month/Year if Spouse is a Taft Grad	Number of Children	Number of Grandchildren	
Schools of Higher Learning, Degrees, Year of Graduation			
Occupation		Interests	
Other news you'd like to share			
<input type="checkbox"/> I wish to be listed in the <i>TAA Email Directory</i> on the TAA website www.taftalumni.org			
You have three options for receiving the quarterly <i>TAA Newsletter</i> . Please select <u>one</u> of the following:			
<input type="checkbox"/> I wish to receive the newsletter by postal service only <input type="checkbox"/> I wish to receive an e-newsletter by email to defray the costs of postage <input type="checkbox"/> I wish to receive the newsletter by email <u>and</u> by postal service			
Dues are \$15.00 for a two year membership or \$20.00 for an alumni couple (give spouse's name if a Taft graduate).			
Enclosed is a check or money order for dues in the amount of <input type="checkbox"/> \$15.00 <input type="checkbox"/> \$20.00 <input type="checkbox"/> Enclosed is a check or money order donation in the amount of \$ _____.00			
Please mail this completed application along with your check or money order to:			
Taft Alumni Association, 6530 West Bryn Mawr Avenue, Chicago, IL 60631			