

**Membership Application**

Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: ­­­­­­\_\_\_\_\_\_\_\_ Zipcode: \_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Alumnus: Yes\_\_\_ No\_\_\_

 If so, what year did you graduate? \_\_\_\_\_\_\_\_

Membership Level (circle one):

 Lifetime $500

 Platinum $100

 Gold $50

 Silver $25

 Bronze $15

 Student $5

\*\*Members receive discounts to Bulldog Foundation events and activity communications\*\*

Are you interested in serving as a board member or a committee member? If so, we will contact you about serving.

Yes: \_\_\_\_\_ No: \_\_\_\_\_

Please enclose membership application, check and mail to the following address:

The Bulldog Foundation

P.O. Box 351

Newville, PA 17241