

UGRA Annual Contributing Membership Form

Name: _____

Date: _____

YES! ... I want to help promote the welfare of retirees and to foster a mutually beneficial relationship between retirees and the University. Please accept my contribution to the UGRA's administrative costs.

My Contribution: \$ _____

The suggested annual membership contribution is \$25 per year.
This contribution is *not* eligible for a tax receipt

Address:

Street: _____

City: _____ Province: _____

Country: _____ Postal Code: _____

Phone Number: _____

Email Address: _____

Privacy note: The phone number and email address will be added to our UGRA membership database and used for UGRA member communications only.

I would also like to receive more information about

___ serving on the Executive of the UGRA or on one of its committees

___ the UGRA Undergraduate Scholarship

**Make cheque payable to the "University of Guelph Retirees Association"
and mail to**

University of Guelph Retirees Association
PO Box 48-4916
University of Guelph
Guelph, ON N1G 2W1