



# MEMBERSHIP FORM

INSTITUTION \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ZIP CODE \_\_\_\_\_

PHONE ( \_\_\_\_\_ ) \_\_\_\_\_ FAX ( \_\_\_\_\_ ) \_\_\_\_\_

CONTACT PERSON \_\_\_\_\_

EMAIL \_\_\_\_\_

## TYPE OF INSTITUTION

CIRCLE ONE: COLLEGE / UNIVERSITY COMMUNITY / JR COLLEGE OTHER

CIRCLE ONE: PUBLIC PRIVATE

ENROLLMENT: \_\_\_\_\_

## FEE ASSESSMENTS

**INSTITUTIONAL DUES** (\$50.00, INCLUDES ONE PROFESSIONAL MEMBERSHIP) \$ \_\_\_\_\_

**INDIVIDUAL DUES** (\$15.00 PER PROFESSIONAL MEMBERSHIP) \$ \_\_\_\_\_

**STUDENT DUES** (\$5.00 PER STUDENT MEMBERSHIP) \$ \_\_\_\_\_

**LATE FEE** (\$15.00/INSTITUTION AND \$5.00/PROFESSIONAL MEMBERSHIP) \$ \_\_\_\_\_  
(if payment is made after November 1st)

TOTAL AMOUNT PAID: \$ \_\_\_\_\_

## LIST ALL MEMBERS

Professional (P) and Student (S)

NAME	EMAIL	NAME	EMAIL
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

MAKE ALL CHECKS PAYABLE TO **LCIRSA**. PLEASE MAIL TO:  
Loyola University New Orleans  
Department of Student Involvement Box 1  
Attn: Zach Bracey  
6363 St. Charles Ave  
New Orleans, LA 70118

