

The University Club
MEMBERSHIP FORM 2022-2023
6/1/22 through 5/31/23

Name: _____
Last First

Address: _____

City State Zip
Phone: _____ (Please indicate cell or landline)

Email: _____

Spouse/Partner (Optional) _____

Check Membership That Applies To You

_____ NEW to The University Club

_____ RENEWAL to The University Club

Annual Membership dues are \$20

(Renewals are \$25 after Oct. 1st)

Send Dues, Payable to **The University Club** to
Evonne Freeman, 2240 E. Grantview Dr., Coralville, IA 52241

(For Office Use Only)

Date Dues Paid _____ Amount Rcvd. _____

(Cash) _____ (Check #) _____ Received By _____

Special Note About Clarion Newsletter

To receive the Clarion Newsletter by email **ONLY** and not by postal mail,
send an email to: clarionnewsletter@gmail.com