

Faculty Club

Membership Application

Dr. Prof. Rev. Miss. Mrs. Ms. Mr.
Other _____

U of A Employee Number _____

Surname, First Name, Middle Initials

_____, _____, _____

Address

City

Province

Postal code

Primary Phone

Business Phone

Department

Position

Email

New Membership Welcome Discount

Valid for applicants who are applying for membership for the first time OR who have not been a member in the past three years. Membership dues are **FREE for the first year**. Dues will be charged at the Regular Membership rate after the one year promotion.

x _____ Yearly Dues: \$360.00 + GST

Returning Member

Valid for applicants who are rejoining. Dues may be paid through payroll deduction or charges on statement

x _____ Monthly Dues: \$30.00 + GST

Payroll Quarterly Yearly

Do you wish a membership card for your spouse? *no charge*

Name of Spouse

Spouse's Signature

I hereby apply for membership in the Faculty Club and agree to pay dues in accordance with the rate established by the Faculty Club Executive. I understand that dues are to be paid in advance, and in the event of my wishing to resign my membership, I must give notice in writing to the Club Manager or the Chair of the Membership Committee at least 30 days in advance of the proposed date of resignation or leave. I understand that if I resign for reasons other than Administrative or Study Leave and wish to rejoin within 12 months, I will be assessed a fee of \$100.00.

Applicant Signature

MM/DD/YYYY

Name of Sponsor *not required*

Sponsor will receive a coupon of two chef special dinners and one bottle house wine.

**Please mail or fax completed form to:
The Faculty Club, 11435 Saskatchewan Drive
Edmonton, Alberta, T6G 2G9**

P 780.492.4231 **F** 780.492.4199 **E** facclub@ualberta.ca

For Faculty Club use only

Effective Date of Membership

MM/DD/YYYY

Membership Number

Initial Deduction Month

Salary Cheque

Final Deduction Month

Salary Cheque

Authorized by Faculty Club

MM/DD/YYYY