



# The University Club

331 West College Avenue

State College, PA 16801

Phone: 814-237-6576

## Application for membership:

Name: \_\_\_\_\_  
Last First Middle Initial

Spouse or Partner: \_\_\_\_\_  
Last First Middle Initial

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

\_\_\_\_\_  
City State Zip Code

Telephone: (home) \_\_\_\_\_ (work) \_\_\_\_\_

(cell #1) \_\_\_\_\_ (cell #2) \_\_\_\_\_

E-mail Address \_\_\_\_\_

I hereby apply for membership in The University Club and agree, if accepted,  
to be governed by its constitution, bylaws and rules.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Membership dues are \$100.00 per year for individuals, \$150.00 for couples.

Please send your completed application to: **The University Club**  
**P.O. Box 1312**  
**State College, PA 16804**

Attention: Membership

You will be notified of the action taken on your application following the next Board of Directors meeting.

*Thank you for applying for membership in The University Club.*