



MEMBERSHIP APPLICATION

Revised: 08.2021

This application is <input type="checkbox"/> INITIAL <input type="checkbox"/> RENEWAL / INFO UPDATE		Date of Submission:	
First Name:	Middle Name:	Last Name:	
Street Address:	City:	State:	ZIP Code:
Email Address:		Phone Number:	
		<i>Please check:</i> <input type="checkbox"/> Mobile <input type="checkbox"/> Home <input type="checkbox"/> Work	
First and Last Name at UP:	Degree/s Received at UP and Year of Graduation:		
<i>May we contact you for active volunteer work with UPAAGC?</i> <input type="checkbox"/> YES <input type="checkbox"/> NO <i>May we send you UPAAGC-related information by email?</i> <input type="checkbox"/> YES <input type="checkbox"/> NO <i>May we share your email with UPAAGC partners & UPAA chapters?</i> <input type="checkbox"/> YES <input type="checkbox"/> NO <i>When is your Birthday?</i>	<i>Please check committee/s you wish to actively participate in:</i> <input type="checkbox"/> Ethics <input type="checkbox"/> Technology <input type="checkbox"/> Grant Applications <input type="checkbox"/> Socials <input type="checkbox"/> Membership <input type="checkbox"/> Nominations/Election <input type="checkbox"/> By-laws <input type="checkbox"/> Development <input type="checkbox"/> Education <input type="checkbox"/> Public Relations		
		Type of Membership: <input type="checkbox"/> REGULAR <input type="checkbox"/> ASSOCIATE NOTE: Regular members are alumni who graduated at the University of the Philippines. Associate members are former students of the University of the Philippines including supporters and friends, who subscribe to the purposes of the University of the Philippines Alumni Association of Greater Chicago (UPAAGC), a 501(c)(3) organization.	
WAIVER: From time to time, we take photographs and recordings of our events for publicity in print and online. Please check if you agree to be included in our publicity: <input type="checkbox"/> YES, do include my image in your publicity. <input type="checkbox"/> NO, do not include my image in your publicity.			
Signature: _____			

Please send this completed form to:

UPAAGC

Mail: 1825 Jasper Court
Wheaton IL 60189

Email: upaagc1@gmail.com

Payment: \$50 Annual Fee OR \$500 Lifetime Fee

Check enclosed (make check payable to UPAAGC)

Quickpay/Zelle payment

(send to: upaagc1@gmail.com, Account: UPAAGC)

Other: _____