CARDINAL CLUB

Referred By: _____

Membership Form

Name or Company: _____

Contact Name: _____

Address1: _____

City, State, Zip: _____

Home Phone: _____

Email: _____

Publication Listing: _____
{As your name(s) should appear in Athletic Department publications}

▪ CARDINAL ($7,500) **▪ SCHOLARSHIP ($5,000)** **▪ PRESIDENT ($2,500)**

▪DIRECTOR ($1,000) **▪ BIG RED ($500)** **▪ LETTER WINNER ($200)** **▪VARSITY ($50)**

Please Include Me in the "Red Shirt" Program...__YES __NO
(1/2 price membership for the first year @ Letter Winner and above levels. Please see attached brochure for prices and to see if you qualify.)

2006 Total Pledge……..$_____

Amount Enclosed……..$_____ □ Check □ Credit

Company Matching Gift……__YES __NO
(enclose matching gift form) (if yes, company name _____)

I Decline All Benefits for Tax Purposes….__ YES __NO

Billing Information (monthly installments)……..__Direct Billing __LU Employee Payroll Deduction

Credit Card Information……..__Visa __Mastercard __Discover __Amex

Card Number _____ Exp Date_____

PLEASE MAIL TO: **LAMAR UNIVERSITY, P.O. BOX 10066, BEAUMONT, TX 77710**