

University of North Texas

Parent Association Membership Form



UNT Parent Association
 1155 Union Circle #311274
 Denton, Texas 76203
 Phone: 940-565-4198
 Fax: 940-369-7849
www.unt.edu/parents

Date: _____

Please *ONLY* complete the Membership Level information below that applies to the membership type indicated.

Membership Type:

NEW Member RENEWING Member

Student Information:

Student Name: _____ DOB: _____ Phone: _____

Residence Hall & Room Number _____ Off-Campus Address (If Not in Housing) _____

My student is an Honors College Student: YES NO

Member Information:

Parent 1 Name: _____ Alumnae/Alumnus Class: Year: _____

Parent 1 Email: _____ Parent 1 Occupation: _____

Parent 2 Name: _____ Alumnae/Alumnus Class: Year: _____

Parent 2 Email: _____ Parent 2 Occupation: _____

Address: _____ Zip/Postal Code: _____

City, State: _____ Phone Number: _____

Please list my contact information in the Roadside Assistance Booklet as someone willing to assist travelling UNT students.

Please have a Career Center rep. contact me with ways I can help students through career development partnerships.

Membership Level--RENEWING Members

\$70 Annual Membership
 Effective until August 31 of the current academic year

\$125 Two-Year Membership
 Effective for two academic years

Lifetime Membership--Upgrade
 Effective for as long as you choose remain an active member of the Parent Association
 \$240 Upgrade from Annual to Lifetime
 \$185 Upgrade from Two-Year to Lifetime

I would like to make an additional donation to the Parent Association scholarship fund.

Amount: _____

OR

Membership Level--NEW Members Only

\$70 Annual Membership
 Effective until August 31 of the current academic year

\$125 Two-Year Membership
 Effective for two academic years

\$300 Lifetime Membership
 Effective for as long as you choose remain an active member of the Parent Association

I would like to make an additional donation to the Parent Association scholarship fund.

Amount: _____

Payment Information

Check made payable to Check Number
 UNT Parent Association

Credit Card

American Express Card Number:
 Discover Expiration Date:
 Mastercard Cardholder Name:
 Visa

We value the security of your information, but data is not secure until received and processed by office staff.

FOR OFFICE USE ONLY

Method Received: In Person Email Mail Fax
 Items Sent: Card Calendar Mug Pin (lifetime Only)