UCF Black Faculty & Staff Association Membership Application

2010-2011

Membership

□ New Members	•					
□ Renewal Mem	_		г 1			
Name Department			E-mail _ Building	Room	Phone	
Facu			USPS			Other
Area(s) of Expert	ise:					
Indicate the time(s) that you wo	uld be avai	lable for BFS.	A meetings/act	ivities:	
9:00 am – 12:00 pm -	11:00 am - 2:00 pm		10:00 4:00	0 am – 12:00 p pm – 6:00 pm	m	
Indicate the day(s	s) that best fit y	our schedu	ıle for attendir	ng BFSA meeti	ngs/activit	ies:
MON _	TUES	WE	DTI	HURS	_FRI	SAT
I am interested in	the following	activities:				
☐ Movie Night	☐ Book C	lub 🗆	Theatre \Box	Meeting for I	_unch/Hap	py Hour /Dinner
Other:						
Dues & Schole Please make chec Name Fall 2010	k payable to U	JCF BFSA	and note time	period for whi	ch you are	paying.
					\$10.00	
I would like to make a tax deductible gift to the following scholarship fund(s): Tee Collins Book Award First Generation Student Scholarship BFSA Foundation Scholarship Fund Please make this a separate check from your membership dues!						
Membership: Che	eck # A	mount	Scho	olarship: Check	x#	Amount
Please remit com	pleted form an	d check(s)	to: I wou	ald like to pay	online via l	PayPal.com
Carol Ross, BFSA Accountant, COHE HPA 306, cross@n	PA					