

UCF Black Faculty & Staff Association
Membership Application
2009-2010

Membership

- New Membership
- Renewal Membership

Name _____ E-mail _____
Department _____ Building _____ Room _____ Phone _____
Faculty A&P USPS OPS Other

Area(s) of Expertise: _____

Indicate the time(s) that you would be available for BFSA meetings/activities:

_____ 9:00 am – 11:00 am _____ 10:00 am – 12:00 pm
_____ 12:00 pm – 2:00 pm _____ 4:00 pm – 6:00 pm

Indicate the day(s) that best fit your schedule for attending BFSA meetings/activities:

_____ MON _____ TUES _____ WED _____ THURS _____ FRI _____ SAT

I am interested in the following activities:

- Movie Night Book Club Theatre Meeting for Lunch/Happy Hour /Dinner
- Other: _____

Dues & Scholarship Donations - Dues are \$20.00 per academic year or \$10.00 per term.
Please make check payable to UCF BFSA and note time period for which you are paying.

Name _____ E-mail _____
Fall 2009 - Spring 2010 Fall 2009 Spring 2010
\$20.00 _____ \$10.00 _____ \$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: Check # _____ Amount _____ Scholarship: Check # _____ Amount _____

Please remit completed form and check(s) to: I would like to pay online via PayPal.com

Carol Ross, BFSA Treasurer
Accountant, COHPA
HPA 306, cross@mail.ucf.edu