

## **Sacramento State Emeritus Association Membership Application for 2011**

## **Print this form**

Last Name	First Name	MI	
Home Address Number and Street	City	State Zip	E-mail address
Date Retired	faculty or staff?	Department	Home Phone Number Including Area Code
	Membershi	p Type (circle or	ne)
ي ب		f Area 75 mi \$10 f Area 75 mi \$10	Life Faculty \$300 Life Staff \$150

New or Renewal? (circle one)

I am renewing my membership

I am a new member

Make check payable to "CSUS Emeritus Association" and mail to:

Gene Knepprath, Treasurer CSUS Emeritus Association 2620 P Street Sacramento, CA. 95816