



*Berkeley, CA 94720-6050*

California Alumni Association Member  
Faculty Club Application for Membership

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Year Graduated: \_\_\_\_\_ Discipline Studied: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Home Address: \_\_\_\_\_

\_\_\_\_\_

Business Address: \_\_\_\_\_

\_\_\_\_\_

Business Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Your membership is sponsored by the California Alumni Association. There is a one time initiation fee of \$250.00 and monthly dues will be \$25.00. This membership will entitle you to all applicable membership discounts. Banquet discount will go into effect after one year of membership. Club members and their guests will be able to use restaurant, bar, conference and hotel facilities.

**FOR CLUB USE**

Board Approval \_\_\_\_\_ Date Approved \_\_\_\_\_

CAA Account Number \_\_\_\_\_

Date Entered \_\_\_\_\_ Account Number Assigned \_\_\_\_\_

General Manager's Signature \_\_\_\_\_