



Association of University of Puerto Rico (UPR) Alumni and Friends Abroad
P.O. Box 2600, Merrifield, VA 22116-2600

Membership Application or Renewal Form

Name:	
Mailing Address (Street, etc.):	
City, State & Zip Code:	
Home Phone Number:	
Work Phone Number:	
Mobile Phone Number:	
Email Address:	
UPR Graduation Year:	
UPR Educational System Graduation Campus:	<input type="checkbox"/> Aguadilla <input type="checkbox"/> Arecibo <input type="checkbox"/> Bayamón <input type="checkbox"/> Carolina <input type="checkbox"/> Ciencias Médicas <input type="checkbox"/> Cayey <input type="checkbox"/> Humacao <input type="checkbox"/> Mayaguez <input type="checkbox"/> Ponce <input type="checkbox"/> Río Piedras <input type="checkbox"/> Utuado
I am not a UPR Graduate	<input type="checkbox"/>
Application For:	<input type="checkbox"/> ALUMNI Membership (\$35.00 Annual Dues) \$ _____ .00 Calendar Year 20 ____
	<input type="checkbox"/> FRIEND Membership (\$35.00 Annual Dues) \$ _____ .00 Calendar Year 20 ____
Additional Donation:	<input type="checkbox"/> UPRAA General Scholarship Fund (provides scholarships for students). \$ _____ .00
	<input type="checkbox"/> UPRAA Charity Fund (supports charities).
	<input type="checkbox"/> UPRAA Operational Fund (supports administrative costs incurred in support of scholarships, educational, and charitable activities). \$ _____ .00
Total Amount:	\$ _____ .00
Payment By:	<input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Money Order
	Please make your check or money order payable to UPRAA and remit to:
	UPRAA c/o Treasurer P.O. Box 2600 Merrifield, VA 22116-2600
	<input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express:
	Credit card Number: Security Code Expiration Date:
Signature & Date:	

Privacy Statement: UPRAA values your privacy. We will not share above personal information with third parties without your consent.