

Mississippi Valley State University
National Alumni Association, Inc.

PROFILE FORM

Name: Last First Maiden Nickname Birthday

Address **City** **State** **Zip**

Phone: Home Work Cell

Year Attended/Graduation **Major**

E-mail Address

Collegiate Organization(s) / Membership(s)

Current Job Title **Company/Industry**

MEMBERSHIP INFORMATION

Make checks or money orders payable to: MVSU National Alumni Associations, Inc. Mail along with form to:

Mississippi Valley State University
National Alumni Association
P.O. Box 401
Itta Bena, MS 38941-1400

CHECK ONLY ONE

- Enclosed is \$50.00 for a year's membership in the MVSU National Alumni Association.
- Enclosed is \$500.00 for lifetime membership in the MVSU National Alumni Association. This amount may be paid in installments over a 12 month period.
- I will join the MVSU National Alumni Association. Please mail or e-mail information to me regarding the nearest chapter in my area.
- Enclosed is \$50.00 for a year's associate membership in the MVSU National Alumni Association.
- I will not join the MVSU National Alumni Association or a local chapter, but I have enclosed a donation of \$ _____.
- I will not join the MVSU National Alumni Association or a local chapter, but I will complete and return the contact information listed above.

--- EACH ONE RECRUIT ONE ---