



Application for USC Staff Club Membership

Name: _____ Department: _____

(Please Print)

Campus Address/Mail Code: _____ E-Mail: _____

Home Address: _____

Campus Phone #: _____ Home Phone #: _____

Membership *(Please check one)*

- Regular Membership..... \$100 Annually (\$8.33/month – for exempt staff)
- Regular Membership..... \$50 Annually (\$4.16/month – for non-exempt staff)
- Life Membership \$1,000 (One Time Gift)
- Endowed Membership..... \$150 Annually (\$12.50/month)
- Endowed Membership
(for members of other USC support groups)..... \$100 (\$8.33/month)
- Endowed Family..... \$200 Annually
- Retired \$50 Annually
- Retired Family..... \$75 Annually
- Endowed Retired..... \$100 Annually
- Endowed Retired Family..... \$125 Annually

(Endowed membership contributes \$4.16/month to the Endowment Account. The interest earned pays for graduate student scholarships.)

Method of Payment *(Please select one method)*

Payroll Deduction: *(monthly deductions from your check)*

Employee Number _____

OR

Direct Bill: Annually _____

Check Attached: _____

(Please make check payable to University Staff Club)

Your membership entitles you to receive a membership plaque or to have an amount equivalent to its cost added to the Staff Club Endowment. Please indicate your preference.

Select One: _____ Membership Plaque **or** _____ Contribution to Staff Club Endowment

Recruited By _____

Applicant Signature _____ **Date** _____

Return application to: Robert Boyd, Nominations and Membership, UGB 110, MC 8010