



WESTERN OKLAHOMA STATE COLLEGE

Western Oklahoma State College Alumni Association Membership Form

Name		Occupation	
Address			
City		State	Zip
Phone		Email	
Birthday Month - Day - Year - -		Years Attended	Degree
Please list any activities you were involved in while attending Western.			

- | | |
|--------------------------|--|
| <input type="checkbox"/> | \$10 Annual Membership |
| <input type="checkbox"/> | \$150 Promotional Individual Lifetime Membership |
| <input type="checkbox"/> | \$250 Promotional Couple Lifetime Membership |

Please make your check payable to the WOSC Foundation, Inc. and mail this form to:

WOSC Foundation, Inc
2801 N. Main
Altus, OK 73521

Payment can also be made using a debit/credit card.

Card Type Visa _____ MC _____ Name: _____

Card #: _____ Expiration Date: _____

Call or email for more information: (580) 477-7706 or alumni@wosc.edu