



PennState
Alumni Association
 Greater Binghamton Chapter

GREATER BINGHAMTON CHAPTER INTEREST FORM

INITIAL MEMBER:

Name _____

Address _____

City / State / Zip _____

Phone Number _____ Email Address _____

Joining as Alumni (Class year) _____ Parent of Student Fan

ADDITIONAL MEMBER (if applicable)

Name _____

Address _____

City / State / Zip _____

Phone Number _____ Email Address _____

Joining as Alumni (Class year) _____ Parent of Student Fan

Each year our chapter collects donations to allow us to present students from our area with scholarships.

I wish to make a tax-deductible donation to the **Greater Binghamton Student Scholarship Fund** in the amount of \$_____.

In lieu of membership dues, I wish to make a tax-deductible donation to the **Greater Binghamton General Fund** in the amount of \$_____.

Interests (check all that apply):	
<input type="checkbox"/>	Chapter Officer
<input type="checkbox"/>	Chapter Board Member
<input type="checkbox"/>	THON Activities
<input type="checkbox"/>	Student Activities
<input type="checkbox"/>	Social Committee
<input type="checkbox"/>	Event Tickets
<input type="checkbox"/>	Chapter Board Meetings (every 2 nd Wednesday – virtual)
<input type="checkbox"/>	Other _____

Please make any checks payable to **Penn State Chapter of Greater Binghamton**

Please mail this form and any checks c/o **Harolyn Pasquale, 3734 Maplehurst Dr, Endwell, NY 13760**