

**WEST TECH ALUMNI ASSOCIATION, INC. MEMBERSHIP FORM**

Name \_\_\_\_\_

Maiden Name \_\_\_\_\_

WTH Class Month \_\_\_\_\_ Class Year \_\_\_\_\_ Phone \_\_\_\_\_

Status:  Student  Faculty  Staff from \_\_\_\_\_ to \_\_\_\_\_

Other \_\_\_\_\_ May we contact you by email?  Yes  No

E-Mail \_\_\_\_\_

Address \_\_\_\_\_

**Check Length and Cost Below**

Length	Single	Joint
Per year	<input type="checkbox"/> \$10	<input type="checkbox"/> \$15
3-Years	<input type="checkbox"/> \$25	<input type="checkbox"/> \$35
5-Years	<input type="checkbox"/> \$40	<input type="checkbox"/> \$55

**Crimson & Gray (Lifetime)**  
SINGLE \$125.00

Spouse's Name \_\_\_\_\_

Maiden Name \_\_\_\_\_

WTH Class Month \_\_\_\_\_ Class Year \_\_\_\_\_

Type of Membership \_\_\_\_\_

**Please Check 1 of the boxes below**

- New  Honorary
- Renewal  Gift Membership

Method of Payment  Check (US Funds only)  Credit Card

Signature \_\_\_\_\_

Card # \_\_\_\_\_ \* Exp. Date \_\_\_\_\_

**Send Form & Payment to:**  
West Tech Alumni Association Inc.  
Attention: MEMBERSHIP  
2201 W. 93 Street, Rm 2012.  
Cleveland, OH 44102

\* All credit card users, please add 3-digit code after card number on back of card

Include a self-addressed, stamped # 10 business envelope to receive membership card by mail or pick up at WTAA meetings.

**PLEASE include EMAIL Address above. (This helps us to better serve you).**

02/18/2020

For info, questions or concerns please contact Diane (Thompson) Lekon at [jddkl@wowway.com](mailto:jddkl@wowway.com) or call her at (440) 724-5077