**2016 – 2017 PA TRIO Membership Form**

***July 1st – June 30th***

**Please complete *all* items and enclose the appropriate fee.**

**Type of Membership**: Full Program - $175 Associate Program ‐ $150

Full Individual ‐ $75 Associate Individual ‐ $75 Lifetime Individual Membership ‐ $300

**Project *(Check One)*:** Classic UB EOC McNair SSS Talent Search UBMS VUB Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Agency/Institution Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(ext.)\_\_\_\_\_\_\_\_\_\_\_\_ Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Web Page Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Number of Students to Serve: \_\_\_\_\_\_\_\_\_\_\_\_\_ Total Years Funded: \_\_\_\_\_\_\_\_\_\_

Amount of Grant *(yearly)*: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Based in Congressional District: \_\_\_\_\_\_\_\_\_\_\_\_ Congressional District(s) Served: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Project Director Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of Person Completing this Form: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Payment by: 🞏 Check 🞏 PayPal If paying by PayPal, enter receipt number here: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **List ALL program staff members (including support staff) below. Attach additional page if necessary. Membership data is added to the PA TRIO directory.**  **In accordance with the PA TRIO Constitution & Bylaws, ALL PA TRIO Members may vote in General Business Meetings. Three (3) members (per individual TRIO program) can be designated to vote in the Election of Officers. Please indicate the designated voters for Officer elections in the last column.** | | | | | | |
| **Name** | **Title** | **Month/Year Began TRIO** | **Email\*** | **Phone** | **TRIO Alumnus?** | **Designated to Vote in Officer Elections** |
|  |  |  |  |  | Yes No | Yes No |
|  |  |  |  |  | Yes No | Yes No |
|  |  |  |  |  | Yes No | Yes No |
|  |  |  |  |  | Yes No | Yes No |
|  |  |  |  |  | Yes No | Yes No |
|  |  |  |  |  | Yes No | Yes No |

\*Members will be added to the PA TRIO listserv (the main communication line of PA TRiO to its membership). If you would prefer ***not*** to be added to the PA TRIO listserv, please draw a line through your email address.

***Forward completed form and payment (payable to PA TRIO or via PayPal at www.patrio.us) to:***

**Anne Heinzeroth, Director Upward Bound Program Saint Francis University P.O. Box 600 Loretto, PA 15940-0600**

Questions about payment: Willie West, (814) 863-1296 or [wdw11@psu.edu](mailto:wdw11@psu.edu) Questions about membership: Anne Heinzeroth, (814) 472-3023 or [aheinzeroth@francis.edu](mailto:aheinzeroth@francis.edu)

***Helpful Websites for Congressional District Info:***[www.house.gov/representatives/](http://www.house.gov/representatives/) and [www.govtrack.us/congress/findyourreps.xpd?state=PA](http://www.govtrack.us/congress/findyourreps.xpd?state=PA)