

INDIANA UNIVERSITY / IU ALUMNI ASSOCIATION MEMBERSHIP PAYROLL DEDUCTION FORM

This membership is from _____ Employee ID # (On your pay stub. **Required.**) _____

Campus / Department _____ IU E-mail Address _____

Home Address _____ Home Phone _____

Employee Pay Type: 10 month 12 month Biweekly (will be deducted the first paycheck of each month)

Select your membership plan. (*Recent Grads are those who received their first IU degree within the past five years.*)

- | | | | | |
|----------------------------------------------------------|----------------------------------------------------------|---|-----------------------------------------------------------|-----------------------------------------------------------|
| Annual \$50 | Joint Annual \$75 | : | Life \$750 | Joint Life \$950 |
| <input type="checkbox"/> 5 payroll deductions of \$10 | <input type="checkbox"/> 5 payroll deductions of \$15 | : | <input type="checkbox"/> 10 payroll deductions of \$75 | <input type="checkbox"/> 10 payroll deductions of \$95 |
| <input type="checkbox"/> 10 payroll deductions of \$5 | <input type="checkbox"/> 10 payroll deductions of \$7.50 | : | Senior Life (age 60+)..... \$375 | Senior Joint Life (age 60+) .. \$475 |
| Recent Grad Annual \$25 | Recent Grad Joint Annual ... \$35 | : | <input type="checkbox"/> 10 payroll deductions of \$37.50 | <input type="checkbox"/> 10 payroll deductions of \$47.50 |
| <input type="checkbox"/> 5 payroll deductions of \$5 | <input type="checkbox"/> 5 payroll deductions of \$7 | : | Recent Grad Life..... \$500 | Recent Grad Joint Life ... \$650 |
| <input type="checkbox"/> 10 payroll deductions of \$2.50 | <input type="checkbox"/> 10 payroll deductions of \$3.50 | : | <input type="checkbox"/> 10 payroll deductions of \$50 | <input type="checkbox"/> 10 payroll deductions of \$65 |

Joint member name _____ **Relationship** _____

Total amount per pay period = \$ _____.

I hereby authorize Indiana University to deduct the amount indicated above, each pay period, unless revoked by me in writing.

Date _____ / _____ Signature _____
(mo.) (yr.)

Return to: IU Alumni Association, Attn: Payroll Deduction, 1000 E. 17th St., Bloomington, IN 47408, or call (800) 824-3044.

Your IUAA membership dues are 80% tax deductible as a charitable contribution.