

Print, fill out and send to: Warren Whitaker 1649 Glacier St Pocatello, ID 83201

2020-21 F.A.T. Membership

PERSONAL INFORMATION

| | |
|---------------------|------------|
| Last Name | First Name |
| Spouse's First Name | Phone # |
| Email Address | |

MAILING ADDRESS

| | | |
|---------|-------|----------|
| Address | | |
| City | State | Zip Code |

MEMBERSHIP INFORMATION

| | |
|--------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|
| Membership Type—Circle One F.A.T. Guy F.A.T. Friend | Year(s) Played (Example: 1964-65) |
| Donation Amount—Circle One \$50 \$100 \$250 \$500 \$1,000 | |

PAYMENT INFORMATION

| | |
|-----------------------------------------------------------------------------------------------------------------------|-----------------|
| Payment Type—Circle One Check (Make Payable to: ISUFootball Alumni Team) VISA MasterCard | Total |
| Credit Card # | |
| Exp. Date | CVV or CSC Code |

Signature

Today's Date