

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

2023-24 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