



# BLACK COLLEGIAN CAUCUS

Return To:  
Walb Union 214  
Or  
Christopher Riley  
Walb O.D.M.A. 118B  
260-481-6847

## Membership Sign-Up Form

2009-20010

### Personal Information

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Last Name \_\_\_\_\_

Address \_\_\_\_\_ State/Zip \_\_\_\_\_

Home Number \_\_\_\_\_ Cell Number \_\_\_\_\_

Email \_\_\_\_\_

### Notes

### Membership Information

Check Only  
One:

REGULAR  
MEMBER  
(IPFW STUDENTS)

EXECUTIVE  
MEMBER  
(OFFICER)

ASSOCIATE  
MEMBER  
(NON STUDENTS)

Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Received Signature Date

\_\_\_\_\_  
Approved Secretary Date