



KABHE MEMBERSHIP APPLICATION

MEMBERSHIP FEE: \$35.00

APPLICATION

Applicant's Last Name	First	Middle Initial	Suffix
			<input type="checkbox"/> Jr. <input type="checkbox"/> Ph.D. <input type="checkbox"/> Sr. <input type="checkbox"/> J.D. <input type="checkbox"/> II <input type="checkbox"/> M.D. <input type="checkbox"/> III
Institution/Organization		Title/Position/Department:	
Address:	City	State	Zip Code
Phone (include area code):		Fax (include area code):	
Email:		Shirt Size:	
		<input type="checkbox"/> X-Small <input type="checkbox"/> Large <input type="checkbox"/> Small <input type="checkbox"/> X- Large <input type="checkbox"/> Medium <input type="checkbox"/> XX-Large	

SIGNATURE

Applicant's Signature:	Date:
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Forward completed application & fee to:

Sandra D. Moore, ABD
 Special Assistant to the Provost for University Diversity
 Eastern Kentucky University
 SSB 442, CPO 57
 521 Lancaster Avenue
 Richmond, KY 40475
 Office: 859-622-6587
 Fax: 859-622-6390
www.diversity.eku.edu

Make Checks Payable to KABHE