

DeSoto Parish LSU Club

Name _____
 Address _____
 City, State, Zip _____
 Phone (Home) _____ (Office) _____
 E-mail _____

Please check any areas of service you might be interested in:

Fundraisers Membership Scholarship Banquet
 TV Game Parties Early Social or Cookout Golf Classic

Relationship to LSU: Please check those that apply:

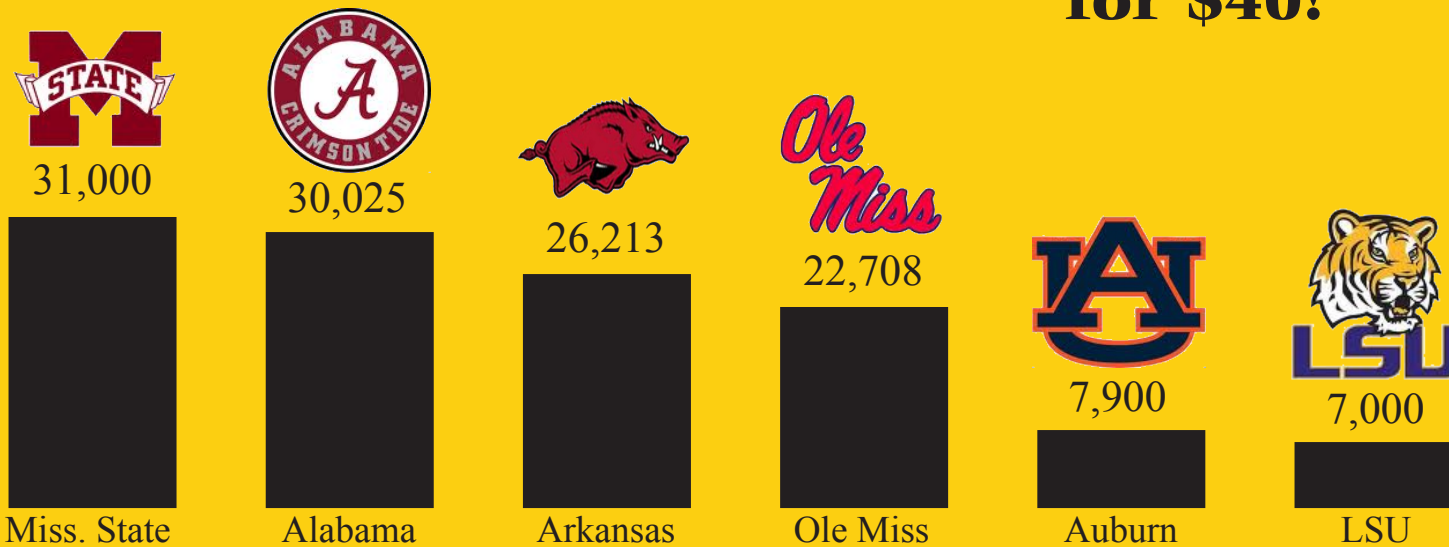
Parent of Student(s) Fan
 Attended Years _____ Graduate (Yr) _____
 Post Graduate (Yr) _____ Bleed Purple and Gold

Yearly Membership: Please check one or enclose check with form if joining.

Family\$20 _____ Name _____
 Individual\$15 _____

Mail or Fax to:

DeSoto Parish LSU Alumni Association
 Box 1019, Mansfield, LA 71052
 Phone 318-872-3972
 Fax 318-872-3976



DID YOU KNOW??

There are only 7000 dues paying members of the LSU Alumni Association?

Where do we rank compared to those SEC schools in our division?

NOT NUMBER 1...BUT LAST!

Help us bring LSU Out of the Cellar in the SEC West.

LSU alums and fans do not like losing to the likes of any of our SEC opponents in any sporting event or academic ranking, especially those in the Western Division.

Join Both NOW for \$40!

THE LSU ALUMNI FUND CONTRIBUTION FORM

Please complete and mail this contribution form to:
 LSU Alumni Association, 3838 West Lakeshore Drive
 Baton Rouge, LA 70808, www.lsualumni.org

YES! I want to support vital programs promoting LSU by making the enclosed contribution to the LSU Alumni Fund.

- My check is enclosed in the amount of \$ _____
 I prefer making contributions on the pledge plan, as indicated below.
 Please remind me when payments are due. I pledge \$ _____ at each interval for a total of \$ _____. (please check all that apply)
 Jan. Feb. Mar. Apr. May June
 July Aug. Sept. Oct. Nov. Dec.
 Charge to my: MasterCard Visa AMEX Discover

Account No. _____ Exp. Date _____

Charge Amount \$ _____ Sig. on card _____

- Until further notice charge my contribution each year to my cc.
 Send recognition item (recognition items given for unrestricted gifts of \$100 or more, only). Eight weeks delivery.

Full Name _____

Preferred Name _____ Employer _____

Home Address _____

City/ State/ Zip _____

Graduation Year(s) _____ Spouse's Graduation Year(s) _____

E-mail _____

Home Phone _____

Business Phone _____

Business Address _____

City/ State/ Zip _____

Spouse's Full Name _____

Spouse's Employer _____

Please make check payable to LSU Alumni Association. The fund year is January 1 through December 31. **Contributions to the LSU Alumni Fund are tax deductible.**

If you work for or are retired from a matching gift company, remember to enclose your firm's matching gift form along with your contribution.

| Alumni Fund Giving Clubs | |
|--------------------------|----------|
| Chancellor's Club | \$10,000 |
| University Club | \$5,000 |
| Tower Club | \$1,000 |
| Gold Club | \$500 |
| Purple Club | \$250 |
| Century Club | \$100 |
| Tiger Club | \$50 |