



Alumni Club of the Triangle – North Carolina

2024-2025 Membership

_____ New

_____ Renewal

MEMBER #1 Single Membership

First Name _____

Last Name _____

Phone Number _____

Email _____

OSU Graduation Year (if applicable) _____

MEMBER #2 Joint Membership

First Name _____

Last Name _____

Phone Number _____

Email _____

OSU Graduation Year (if applicable) _____

Home Address Information: If no changes need to be made from previous year, indicate SAME

Street Address _____

City _____ State _____ Zip Code _____

Payment Method circle one: **Check/PayPal**

\$ _____ Membership Amount \$20 Single / \$30 Joint

\$ _____ additional amount included to support the scholarship fund and club activities

For payment by check, please contact us at trianglencclub@osu.edu for the current mailing address. Checks should be made payable to OSU Alumni Club of the Triangle

For payments via PayPal, please complete the membership form and email it to: trianglencclub@osu.edu. Payments processed through PayPal include a small processing fee.