



UT ARLINGTON



MAVERICK CLUB

2011-12 MAVERICK CLUB MEMBERSHIP FORM

Name _____

Home Address _____

Business Name/Address _____

Phone Numbers Home _____

Business _____

Mobile _____

Emails Personal _____

Business _____

Mailing Preference

Home Business UTA Box # _____

I would like my Maverick Club membership to be listed under the following name: _____

MEMBERSHIP OPTIONS

Renewal for 2011-12 New Member

\$1,000 - Victory \$500 - Blaze

\$250 - Maverick \$100 - Spirit

I would like to decline any benefits related to my gift.

PAYMENT OPTIONS

Check (Made payable to: UTA Athletics) enclosed for the full amount

Monthly UTA Payroll Deduction

Credit Card Billing

Please charge the full amount to the following card:

Visa

Master Card

AMEX

Discover

Card Number _____ Exp Date _____

Signature _____