



2018-2019 Membership Form

Name: _____ Spouse/partner: _____

Street: _____

City, ST Zip: _____

Email: _____

Date of retirement: _____

Dept/unit affiliation at retirement: _____

Title at retirement: _____

Campus retired from: ☐ Davis ☐ Sacramento Other: _____

Home Phone: _____ () _____

Cell Phone: _____ () _____

Membership category:

_____ Annual: \$25 per year (check one: ☐ New ☐ Renewal)

_____ Lifetime: \$200 one-time payment (check one: ☐ New ☐ Upgrade)

(We are pleased to have you as a member either way,
but we would encourage your use of the one-time payment.)

Please make check payable to **UCDEA** and mail it with this form to:

UCDEA
c/o UC Davis Retiree Center
One Shields Avenue
Davis, CA 95616

Staying informed:

The UCDEA and the UC Davis Retiree Center send information by email unless you specify a preference for surface mail. Please note your preference:

Check one: ☐ Email ☐ Surface mail

Video Records Project:

The UCDEA Video Records Project creates an oral history of the UC Davis campus by recording one-on-one interviews of emeriti/ae and others.

What was campus like when you came to Davis? What changes have you seen (buildings, policy or research)? Be a part of campus history by recording an interview.

_____ I may be interested

Office Use: Please do not write below line.

Date: Received: _____ Posted to Membership: _____ Posted to RC Database: _____

Payment Date: _____ Check/Receipt No: _____ Check Amt: _____ Rec'd by: _____ Date Confirmed: _____