



**Leadership Santa Rosa  
Alumni Association**  
P.O. Box 742  
Santa Rosa, CA 95402

2011-2012  
New Member  
Application

**Contact Information**

**Please review all personal information for correctness before returning to LSRAA – as the data below will be published in LSRAA’s Graduate Directory online.**

Name: \_\_\_\_\_ Class No: \_\_\_\_\_  
 Business: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Mailing \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Home Fax: \_\_\_\_\_  
 Business Phone: \_\_\_\_\_ Business Fax: \_\_\_\_\_  
 E-mail (One please): \_\_\_\_\_ Web Site: \_\_\_\_\_  
 Profession or Other Description (Limit: 35 characters): \_\_\_\_\_

**Dues**

LSRAA Membership Dues July 2011-June 2012  
 Graduating Class XXVII -- \$35.00 \$ \_\_\_\_\_  
 All other graduates -- \$50.00 \$ \_\_\_\_\_  
 I would like to be a BBQ sponsor:  
 Sponsorship -- \$200 \$ \_\_\_\_\_  
 Total \$ \_\_\_\_\_

**Payment Method**

Check Payment also available via Paypal, visit <http://lsraa.org/join-lsraa/>  
 Credit Card  
 Card Name: \_\_\_\_\_  
 Card Number: \_\_\_\_\_  
 Expiration Date: \_\_\_\_\_  
 Card Billing Zip Code: \_\_\_\_\_  
 V-Code: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Amount Paid \$ \_\_\_\_\_

To submit by mail send your check and this form to: LSRAA, PO Box 742, Santa Rosa, CA 95402  
 By fax, send this form to Treasurer at 544-4803