

Child's Name		Middle Name			
	First Name	Middle Name	Last Name	Nickname	
Child's Birthday					
Parent's Name _					
Address					
City			Zip		
Home Phone		Cel	Cell Phone		
Email Address _					
Alternate Email /	Address				
		□Child Small □C m □Adult Large □		· ·	
Would you like to au	tomatically ren	ew your membership v	ia credit card each yea	r? □Yes □No	
	ck (Payable to	the University of Memph			
Credit Card Number				Expires	
Signature					

Or join online at memphis.edu/alumni/pouncerspals

Fill out form completely and return to: Pouncer's Pals 635 Normal Street, Memphis, TN 38152