Retired Faculty of the University of Florida

$35 Membership Dues for September 2025-August 2026

Name _____

You may skip the section below if there are no changes

Address _____

City, Zip _____

Phone _____

E-mail Address _____

Retired from:
Univ./College _____

Dept./Discipline _____

Would you like to order an RFUF magnetic name tag? If so, please add $20.

Badge Name: _____

Payment

Mail the membership form and your $35 check to:

RFUF, P O Box 141592, Gainesville FL 32614-1592.

Or hand deliver the form and payment to the Treasurer at the weekly meeting.

Please notify RFUF-membership@cox.net if your payment
is not acknowledged within 2 weeks.