

Retired Faculty of the University of Florida

Membership Dues, 2023-2024

Name _____

Address _____

Phone _____

E-mail Address _____

Retired from:

Univ./College _____

Dept./Discipline _____

Payment Enclosed

\$25 Membership Dues for 2023-2024

Member 1 _____ \$ _____

Member 2 _____ \$ _____

Total Payment: \$ _____

Please mail this form and a check to:
RFUF
PO Box 141592
Gainesville, FL 32614-1592

Please notify RFUF-membership@cox.net if your check is not cashed within 4 weeks.