Illinois State University
University Program Board
Membership Form and Confidentiality Waiver

Name: ________________________________________

Committee(s):

- [ ] Redbird Awareness
- [ ] Redbird Cinema
- [ ] Redbird Days
- [ ] Redbird Diversity
- [ ] Redbird Entertainment
- [ ] Redbird Family
- [ ] Redbird Graphics
- [ ] Redbird LateNite
- [ ] Redbird Spirit
- [ ] Redbird Symposium

Birth Date: ________ T-shirt Size:___________
Major:______________________ Year: ___________

Check if you DO NOT want your information on a full board contact sheet

( ) E-Mail: _________________________________
( ) Cell Phone:____________________________
( ) Local Address: _________________________

I, ______________________, hereby agree that all information released to me by the University Program Board is held as confidential information until otherwise instructed. This form constitutes that I agree to follow all confidentiality standards issued by the University Program Board. Violation of confidentiality guidelines will result in termination of potential membership.

Signature:___________________________________

By signing here you give the University Program Board permission to use your picture for promotional, recruitment an advertisement purposes.

“Making Redbird Moments since 1857, and 2003 respectively”