

**ALUMNAE ASSOCIATION OF THE COLLEGE OF SAINT TERESA
DUES MEMBERSHIP 7-1-2020 TO 6-30-2021**

Name: _____
 first maiden last class year

Address: _____

City: _____ State: _____ Zip: _____

Phone: (H) _____ - _____ - _____ (Cell) _____ - _____ - _____

Email Address: * _____



____ O T H E R ____ \$500 Saint Francis ____ \$100 Saint Clare
____ \$1000 Campanile ____ \$250 Saint Teresa ____ \$ 75 REGULAR CST ID #: _____

Make Checks Payable To: **ALUMNAE OF CST, 357 Gould Street, Winona MN 55987**

AMOUNT PAID \$ _____ CHECK # _____

CREDIT CARD # _____ EXP _____ CVD _____

*We accept Visa/MasterCard/Discover/American Express
PayPal option: www.cstalums.org/donate*

COST SAVINGS MEASURE, YOU WILL NO LONGER BE RECEIVING A DUES MEMBERSHIP CARD

Will you accept the *Teresan News* via email? Y ___ N ___ * Please include email address.