



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 and advertisement purposes.

*"Making Redbird Moments since 1857, and
2003 respectively"*