

# CHANTICLEER ATHLETIC FOUNDATION MEMBERSHIP FORM

Please write your name as you would like it to appear on your account.

Name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Home phone: \_\_\_\_\_ Other phone: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Spouse's name: \_\_\_\_\_

CCU Alumni  Yes  No Years attended? \_\_\_\_\_

Did you play a varsity sport while at Coastal Carolina?  Yes  No

If so, what sport(s)? \_\_\_\_\_

Are you or have you ever been employed by CCU?  Yes  No

If so, which department(s) \_\_\_\_\_

- |  |                 |
|--|-----------------|
| <input type="checkbox"/> Suite Level III _____ | \$10,000        |
| <input type="checkbox"/> Suite Level II _____  | \$5,000-\$9,999 |
| <input type="checkbox"/> Suite Level I _____   | \$3,500-\$4,999 |
| <input type="checkbox"/> Champions _____       | \$1,700-\$3,499 |
| <input type="checkbox"/> Teal _____            | \$1,000-\$1,699 |
| <input type="checkbox"/> All-Conference _____  | \$500-\$999     |
| <input type="checkbox"/> Captains _____        | \$250-\$499     |
| <input type="checkbox"/> Coaches _____         | \$100-\$249     |

Please make checks payable to Chanticleer Athletic Foundation (CAF)

Amount enclosed \$ \_\_\_\_\_

**Donation must be completed before season tickets are mailed  
if donation is related to ticket purchase.**

Card Type:  Visa  MasterCard  American Express  Discover

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please complete the membership form and return to:**

Chanticleer Athletic Foundation  
P.O. Box 261954  
Conway, SC 29528-6054  
www.coastal.edu/caf • www.goccusports.com

