

OFFICE USE ONLY Dues: _____ Initials: _____ Quarter/Year: _____



Vet Aide Club Membership Application

Be sure to fill in your contact information. This is important in the case we need to get in touch with you.
You must be a currently enrolled undergraduate student to become a member.

First Name: _____

Last Name: _____

UCD Email: _____

Phone: _____

Year: (Please circle) 1st 2nd 3rd 4th 5th+ Transfer/Re-entry

Student ID: _____

Expected Graduation Date: Quarter: _____ Year: _____

Do you need to be subscribed to our e-mail service? (Please circle) Yes No

NOTE: This form is for membership only.

If you are applying for an internship, please fill out an internship application which can be found on [our website](#).