

1501 University Boulevard Birmingham, Alabama 35294-1151 Tel 205-934-8224 | Fax 205-996-4866 www.uab.edu/urec

MEMBERSHIP FREEZE FORM

		D	Date:	
Primary Member Preferred Name: _				
	First	MI	Last	
Household Member Preferred Name):			
	First	MI	Last	
Household Member Preferred Name):			
	First	MI	Last	
Minor Member Preferred Name:				
	First	MI	Last	
Minor Member Preferred Name:				
	First	MI	Last	
More than two Household Members	or Minor Members, please list	below:		
When freezing your membership you if frozen. For example, if you plan to freeze your membership as many You cannot freeze your membership	eze your membership on Septem times as is needed, but you mus	ber 1, you need to return this	form on or before August 31. You	
Freeze Start Date:	Re-Start Date: _			
Signature of Participant:				