



Varsity O Alumnae Society

The Ohio State University • Department of Athletics • 410 Woody Hayes Drive, Room 210
Columbus, Ohio 43210 • Phone 614.688.3707 • Fax 614.247.7014

Organization: **VARSITY O ALUMNAE SOCIETY**

As a condition of membership in this organization, I certify and agree to the following:

1. I have received the Ohio State Department of Athletics educational pamphlet titled "Your Guide to Ohio State Athletics (Buckeye Insider)." I have read it and I understand it.
2. I have not knowingly engaged in any violations of NCAA, Big Ten, or University rules and policies applicable to Ohio State's intercollegiate athletics program, and I am currently not aware of any such undisclosed violations.
3. I will abide by all NCAA, Big Ten, and University rules and policies applicable to Ohio State's intercollegiate athletics program that are set forth in the educational pamphlet referenced above, and will report to the Director of Athletics or his/her designee, and to the Associate Athletic Director for Compliance, any violations of those rules and policies of which I become aware.
4. I understand that if I engage in conduct that, in Ohio State's reasonable judgment, is a violation of NCAA, Big Ten, or University rules and policies applicable to Ohio State's intercollegiate athletics program, both this organization and The Ohio State University have the right to withhold any benefits or privileges relating to Ohio State's intercollegiate athletics program to which I may otherwise be entitled (ex. athletic tickets).

For additional information on NCAA, Big Ten, and University rules and policies, please visit OhioStateBuckeyes.com or call the Compliance Office at (614) 292-2681.

Full Name of Member (Print or Type)

Varsity O Membership Number

Signature of Member

Date

Member Certification of Compliance

THIS FORM MUST BE SIGNED AND RETURNED WITH YOUR DUES BY THE ESTABLISHED DEADLINE IN ORDER FOR YOUR MEMBERSHIP TO BE PROCESSED.

Varsity O Alumnae Society 2010 Membership Application

This is updated contact information

Print or Type All Information

Name _____
 First Middle Maiden Last

Home Address _____
 City State Zip

Home Phone _____

Business _____ Title _____

Business Address _____ Phone _____ Fax _____

Preferred E-mail _____

Sport(s) _____ Year(s) _____ Birthday _____

Varsity O Alumnae Society 2010 Membership Dues

Additional Scholarship Contribution _____

Varsity O Annual Dues.....\$40.00

Total Enclosed _____

I am a New Member

I am a Renewing Member

I am a Retro Member

Please make checks payable to: Varsity O

Application, payment and compliance form must be received by **Jan. 31, 2010** To Receive Your Football Ticket Application.