

MY ANNUAL COMMITMENT

LPS Employee Pillar Membership [*]		Amount: \$250 (\$20.84/month)
Name:		
Address:		
Phone:		
E-Mail:		
Techno	e 50% of my contribution to: ology curricular Activities ctional Materials/Programs	
Printed Name		Date
Signature	e	

Please return this form to: LPS Payroll Office Shoemaker Center

*Payroll deduction for current LPS employee at the rate of \$250/year is deducted monthly at the rate of \$20.84. This deduction will continue until the employee requests to discontinue the program.