



Memberships or Dues Authorization Form

This form is to be completed in accordance with [USU Policy Number 522](#). To be an allowable cost to the University, University and individual memberships or dues must be deemed necessary or essential to the effective operation of the University, department, or program.

Department: _____ Date: _____

Company: _____

Membership: _____

Purpose of Membership: _____

Amount: _____

Approval:

Dean/ VP Signature

Date

Please see the [information page](#) for the [instructions](#) regarding the use of this form and payment methods.