

# UNIVERSITY OF COLORADO LICENSE PLATES

## APPLICATION FORM

*Note: One form per vehicle please*

*(Please Print CLEARLY)*

### **Personal Information:**

Name: *(as appears on vehicle title)*: \_\_\_\_\_

Student ID #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Alumnus/a of the University:  Yes  No

If yes, Year: \_\_\_\_\_ College: \_\_\_\_\_

### **Payment Information:**

Enclosed is my check for \$\_\_\_\_\_ payable to the CU Foundation.  
*(A minimum donation of \$50 is required.)*

Please charge \$\_\_\_\_\_ to my:  Visa  MasterCard  Discover  AMEX  
Card Number \_\_\_\_\_ Expiration Date: \_\_\_\_\_

\_\_\_\_\_  
Name as it appears on the card

\_\_\_\_\_  
Signature

**Mail to:** CU License Plates  
CU-Denver Alumni Office  
Campus Box 189  
P.O. Box 173364  
Denver, CO 80217-3364

Please send me an application for **personalized** license plates.  
*(Ralphie will not appear on these plates.)*

For more information, please call 303-556-2549