IMPORTANT PRIVACY CHOICE

You have the right to control whether we share your name, address, and electronic mail address with our affinity partners (companies that we partner with to offer products or services to our alumni). Please read the following information carefully before you make your choice below:

Your Rights

You have the following rights to restrict the sharing of your name, address, and electronic mail address with our affinity partners. This form does not prohibit us from sharing your information when we are required to do so by law. This includes sending you information about the alumni association, the university, or other products or services.

Your Choice

Restrict Information Sharing With Affinity Partners: Unless you say "NO," we may share your name, address, and electronic mail address with our affinity partners. Our affinity partners may send you offers to purchase various products or services that we may have agreed they can offer in partnership with us.

(_) NO, please do	not share my name,	address, and electro	onic mail address wi	th your affinity
partners.				

Time Sensitive Reply

You may decide at any time that you do not want us to share your information with our *affinity* partners. Your choice marked here will remain unless you state otherwise. However, if we do not hear from you, we may share your name, address, and electronic mail address with our affinity partners.

If you decide that you do not want to receive information from our partners, you may do one of the following:

- (1) Print and fax this form to (707-826-5148).
- (2) Reply electronically by submitting this form online at: www.humboldt.edu/~alumni/benefits.html.
- (3) Fill out, sign, and send back this form to us at the following address (you may want to make a copy for your records).

Humboldt State University
Department of Alumni Relations
I Harpst Street, Siemens Hall, Room#215
Arcata, CA 95521

Name (w/ Middle	nitial)	
Address/Zip:		
Phone:		-
Email:		-
Signature:		