



**WASHINGTON SUBURBAN SANITARY COMMISSION
ROBERT G. BERGER MEMORIAL SCHOLARSHIP FUND**

MEMBERSHIP ENROLLMENT FORM

Employee/Retiree Name: _____ Employee No: _____

Department Name: _____

Division Name & No: _____

SELECT CONTRIBUTION TYPE

Bi-Weekly Payroll Deduction/Contribution \$ _____

- **The minimum bi-weekly contribution is \$10 per child, for payroll deduction for student eligibility.**

One-Time Payroll Deduction/Contribution (any amount) \$ _____

One-Time Contribution *check* (any amount) \$ _____

Make check payable to: **Robert G. Berger Memorial Scholarship Fund**

BI-WEEKLY PAYROLL DEDUCTION CHANGES

Withdrawal from Scholarship Fund (Stop Bi-Weekly Deductions)

Change in Bi-Weekly Deduction/Contribution Amount

Employee Signature _____ Date _____

Please note: **The WSSC employee/retiree must be enrolled by January 1st and pledge a minimum per child of \$10 via bi-weekly payroll deduction or \$21.67 Monthly for retirees (or \$260/year) to have their child(ren) eligible for the upcoming scholarship year. Contributions must be continuous and start one year before applying for the scholarship.**

Contributions are not tax deductible as a charitable donation.

The minimum bi-weekly/yearly contribution is subject to change.

Return completed forms to:
Paul Dumas, Treasurer, Robert G. Berger Memorial Scholarship Board
Email: Paul.Dumas@wsscwater.com or

Interoffice Mail:
Piscataway Water Resource Recovery Facility
11 Farmington Road W
Accokeek, MD 20607

Mail Stop: 12