## Association of INFORMATION TECHNOLOGY PROFESSIONALS

<b>Interim</b> Former member of the AITP Student Chapter	Membership Applica at:	tion (Revised	01/26/2005)	
The AITP Interim Member program continues. Association fees. <u>Reduced</u> Association fees a	re as follows: First year Post Graduation I Second year Post Graduation Third year Post Graduation	th the advantages of the three advantages of three advanta	of the Professional AITP members but at <i>Reduced</i> a dues: \$35.00 tion fee: \$45.00	
to join as an Interim member at the first, so			r,	,
(PRINT OR TYPE LEGIBLY)				
Please complete all sections of the application	Please List Your Certifications		■ Former Member ■ Former Interim Member	
Name: First	Middle Initial		Last	
Employer Name:	Your Title		Dept/Div.	
Address:	City	State/Prov.	Zip + 4/Postal	
E-Mail Address:				
Business Phone:	Home Phone:		Fax:	_
information.  PLEASE NOTE THAT YOU MAY AL Association Dues: \$ Chapter Dues: \$ One time Processing Fee: \$ Waived	SO JOIN ONLINE AT OU	JR WEBSITE: he pecify Chapter Se	of AITP	es
SUB-TOTAL  TOTAL  Contributions or gifts to the Association of Inf However, they may be tax deductible as ordina Payment Method: Usa MasterCard		onals (AITP dues) a		
Name on the credit card				
Card Number  I hereby apply for membership in AITP. I age the Association.	ree to comply with the require	Expiration ments of the Bylaw	n Date:/_ s and Code of Ethics and all regulations adopted l	by
Applicant's Signature			Date	
Sponsor Name (PRINT LEGIBLY)				

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