

AITP
Association of INFORMATION TECHNOLOGY PROFESSIONALS

Student Membership Application (Revised 1/25/05)

Please complete all sections of the application. List your certifications _____ Former Student Member
(PRINT OR TYPE LEGIBLY)

College or University _____ Chapter Number _____

Name: First _____ Middle Initial _____ Last _____

Address _____

City _____ State/Prov. _____ Zip + 4/Postal _____

Telephone Number _____ E-Mail Address _____ Expected Graduation Date _____

ALL INFORMATION MUST BE COMPLETED BEFORE THE APPLICATION CAN BE PROCESSED

PLEASE NOTE THAT YOU MAY ALSO JOIN ONLINE AT OUR WEBSITE: <http://WWW.AITP.ORG>

Your Student Chapter, if you choose to join one, may have dues separate from AITP National Student Dues. Student Chapter Dues should be paid directly to the Student Chapter. If a Student Chapter has yet to be formed at your institution, you may still enjoy member benefits as an At-Large National Association Member. There may be Professional Chapter activities in your area that you may be eligible to participate in as a Student Member.

To find out if there is a Student Chapter at your institution or a Professional Chapter in your area, please search the current list of Chapters at <http://www.aitp.org>.

AITP does not sell or rent its mailing list.

Contributions or gifts to the Association of Information Technology Professionals (AITP dues) are not tax deductible as charitable contributions. However, they may be tax deductible as ordinary and necessary business expenses.

AITP National Student Dues are \$35.00, which is due with this Application. Payment required in U.S. Dollars

Specify Payment Method: Visa MasterCard American Express Check Money Order

Name on the credit card: _____

Card Number _____ Expiration Date: ____/____

I hereby apply for membership in AITP. I agree to comply with the requirements of the Bylaws and Code of Ethics and all regulations adopted by the Association of Information Technology Professionals.

Applicant's Signature _____ Date _____

Association of Information Technology Professionals
3439 Paysphere Circle
Chicago, IL 60674

1.312.245.1070 ● 1.800.224.9371 ● FAX 1.312.527.6636 ● AITP_HQ@aitp.org ● www.aitp.org