

No matter how sophisticated the technology, it still takes peoplel TM

## **AITP CSUF CHAPTER** Student Membership Application O Former Student Member Please complete all sections of the application Campus ID# **Expected Graduation Date First Name** Middle Initial Last Name **Mailing Address** City, State, Zip **Permanent Address** City, State, Zip **Telephone #** Email Address **CSUF Email Address** ALL INFORMATION MUST BE COMPLETED BEFORE THE APPLICATION CAN BE PROCESSED The local student chapter dues are paid directly to the Student Chapter. 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 CSUF STUDENT CHAPTER (including National) DUES ARE O \$60 (2 Semesters) O \$40 (1 Semester) 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. Signature Date Submit application to any AITP Officer or to the ISDS Office (SGMH 4113) and make check payable to: AITP Association of Information Technology Professionals California State University Fullerton Student Chapter http://cbect.fullerton.edu/aitp

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