



ASSOCIATION FOR INFORMATION SYSTEMS

Petition to Charter an AIS Student Chapter

F. INSTITUTIONAL ENDORSEMENTS

We have reviewed the qualifications required of a proposed AIS Student Chapter and certify that they are fulfilled at our school. In support of this application we therefore submit the following information, including endorsements by the dean or head of the department.

1. Department Chair

Name _____

Title _____

Email _____ Date _____

Signature _____

2. Dean of College

Name _____

Title _____

Email _____ Date _____

Signature _____

G. PAYMENT

Payment Amount (select one):

\$ 495.00 USD Standard annual organizational fee

Method of Payment: VISA MasterCard American Express Check # _____

Make Checks payable to *Association for Information Systems*

Name of Student Organization: _____

Card Number: _____ Expiration Date: _____ CVV# _____

Cardholder's Name as it appears on the credit card: _____

Billing Address _____

City _____ State/Province _____

Zip/Postal Code _____ Country _____

Cardholder's Signature: _____

PLEASE SUBMIT TO:
Association for Information Systems
P.O. Box 2712
Atlanta, GA 30301-2712, USA
404-413-7443 (fax)
studentchapters@aisnet.org