



# ISM Student Membership Sign-Up Sheet

Instructor Name: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 E-mail: \_\_\_\_\_  
 Institution Name: \_\_\_\_\_  
 Institution Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Signature: \_\_\_\_\_  
 Active ISM Member? If not, check here  and we will process your membership also.

If you are a full-time student, you may qualify for dues-free membership in ISM. Membership benefits include:

- A subscription to *Inside Supply Management*® magazine with leading-edge information for use in the classroom
- Full access to the ISM website (www.ism.ws) with searchable databases and employment opportunities
- Access ISM members receive access to SCC's SCORmark® supply chain benchmarking database
- CAPS Research reports free of charge upon request

Apply for ISM dues-free membership by completing the form below and returning this form to your instructor.

Name: \_\_\_\_\_  
 Preferred Address:  School Year Residence  Home  
 \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 Phone:  Mobile  Home \_\_\_\_\_  
 E-Mail: \_\_\_\_\_  
 DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/YYYY) Gender:  M  F

ISM Use Only:

ID# \_\_\_\_\_ Ord#: \_\_\_\_\_ Approval: \_\_\_\_\_

Name: \_\_\_\_\_  
 Preferred Address:  School Year Residence  Home  
 \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 Phone:  Mobile  Home \_\_\_\_\_  
 E-Mail: \_\_\_\_\_  
 DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/YYYY) Gender:  M  F

ISM Use Only:

ID# \_\_\_\_\_ Ord#: \_\_\_\_\_ Approval: \_\_\_\_\_

Name: \_\_\_\_\_  
 Preferred Address:  School Year Residence  Home  
 \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 Phone:  Mobile  Home \_\_\_\_\_  
 E-Mail: \_\_\_\_\_  
 DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/YYYY) Gender:  M  F

ISM Use Only:

ID# \_\_\_\_\_ Ord#: \_\_\_\_\_ Approval: \_\_\_\_\_

Name: \_\_\_\_\_  
 Preferred Address:  School Year Residence  Home  
 \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 Phone:  Mobile  Home \_\_\_\_\_  
 E-Mail: \_\_\_\_\_  
 DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/YYYY) Gender:  M  F

ISM Use Only:

ID# \_\_\_\_\_ Ord#: \_\_\_\_\_ Approval: \_\_\_\_\_

Name: \_\_\_\_\_  
 Preferred Address:  School Year Residence  Home  
 \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 Phone:  Mobile  Home \_\_\_\_\_  
 E-Mail: \_\_\_\_\_  
 DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/YYYY) Gender:  M  F

ISM Use Only:

ID# \_\_\_\_\_ Ord#: \_\_\_\_\_ Approval: \_\_\_\_\_

Name: \_\_\_\_\_  
 Preferred Address:  School Year Residence  Home  
 \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 Phone:  Mobile  Home \_\_\_\_\_  
 E-Mail: \_\_\_\_\_  
 DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/YYYY) Gender:  M  F

ISM Use Only:

ID# \_\_\_\_\_ Ord#: \_\_\_\_\_ Approval: \_\_\_\_\_