

The Association for Accountants and Financial Professionals in Business



## MEMBERSHIP APPLICATION

Revised 10/27/2011

□ New Application   PERSONAL INFORMATION (please print)	
□ Renewal □ Mr. □ Ms. □ Mrs. Last/Family Na	me/Surname:
First/Given Name:	Middle Initial:
Date of Birth (month/day/year):/ Gende	erPlease indicate Customer/Member ID:
PREFERRED ADDRESS Home  Name:	
Street/P.O.Box:	
City: State:	
Country: Phone: (Include Country/Area/City Codes)	·
E-mail Address:	-
	APPLICANT STATEMENT  Check here if you have ever been convicted of a felony. Please enclose a confidential letter
Student Membership	with a brief explanation of circumstances to the attention of President & CEO.  I affirm that the statements on this application are correct, and I agree to abide
(You must be taking 6 or more credit hours per semester and reside in the U.S., Canada, or Mexico) School UW - Whitewater	by the IMA Statement of Ethical Professional Practice.
Expected Graduation Date (Year)	Signature: Date:
	METHOD OF PAYMENT (All payments must be in U.S. Dollars)
	\$45 for semester \$75 for one year
	Check Payments  My check for \$
Chapter Affiliation (Student) UW - Whitewater Milworkee Chapter	No checks drawn on foreign banks will be accepted unless they are payable through U.S. correspondent banks and in U.S. dollars.
A subscription to <i>Strategic Finance</i> for students is included in dues and is nondeductible. Members also receive a subscription to <i>Management Accounting Quarterly</i> and the <i>IMA Educational Case Journal</i> .	