



## USC-CMAA STUDENT CHAPTER

### STUDENT MEMBERSHIP APPLICATION

NAME: \_\_\_\_\_

CLASS STANDING: \_\_\_\_\_

EXPECTED GRADUATION: \_\_\_\_\_

PROGRAM: \_\_\_\_\_

CONCENTRATION: \_\_\_\_\_

EMAIL: \_\_\_\_\_

PHONE: \_\_\_\_\_

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**WHAT ARE SOME OF THE TOPICS YOU WOULD LIKE TO SEE FOCUSED ON IN A SPEAKER SERIES?**

**MEMBERSHIP FEE OF \$12 PAYABLE TO USC-CMAA  
Please deliver check to a CMAA Officer or to KAP 223**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_