

**Appalachian State University
AITP Membership Form
2021-2022**

First Name: _____ **Last Name:** _____

Academic Classification:

- | | | |
|------------------------------------|---------------------------------|---------------------------------------|
| <input type="checkbox"/> Freshman | <input type="checkbox"/> Junior | <input type="checkbox"/> Grad Student |
| <input type="checkbox"/> Sophomore | <input type="checkbox"/> Senior | |

Expected Graduation Date (month/year): ____/20__

ASU E-mail Address: _____@appstate.edu

Type & Length of Membership:

Select One:

- ☐ New Member
☐ Renewing Member

Select One:

- ☐ Full Year (\$30)
☐ One Semester (\$20 – only if you graduate in Dec.)

Major(s): _____

Areas of Interest (Check All That Apply):

- ☐ Events
☐ Service
☐ Branding/Marketing
☐ Fundraising
☐ Other (Please Specify): _____.

-----**DO NOT MARK BELOW THIS LINE**-----

Monies to be Collected:

Full Year	\$30.00
Semester	\$20.00

Circle One: CASH CHECK