

BICSI Global Student Membership Application

Return completed form via mail to BICSI, 8610 Hidden River Parkway, Tampa, FL 33637-1000 USA or fax to +1 813.436.5422.

You may also apply online at bicsi.org/membership. Tel: +1 813.979.1991 or 800.242.7405 (USA and Canada toll-free); Email: global@bicsi.org



Last name		First name	Middle initial
Member/Customer number (if applicable)		Year of Birth (Optional)	Gender (Male/Female) (Optional)
How did you hear about BICSI?			
Home address		Street or P.O. box	Apartment number
City	State/Province	Zip/Postal code	Country
Company name (If applicable)		Job title	Company website
Business address		Street or P.O. box	
City	State/Province	Zip/Postal code	Country
Daytime phone	Cell phone	Email (By providing your email address you consent to receive emails from BICSI.)	

Do not disclose my name. (By selecting this option, your name will not appear on the BICSI Web member database.)

By initialing here _____ I confirm that I have read the BICSI Code of Ethics and Standards of Conduct (visit www.bicsi.org/ethics) and agree to adhere to them. (Required for membership to be processed).

About You

What is current education level?

- High School
- Vocational/Technical School
- 2-year University
- 4-Year University
- Other (Explain)

Student Membership Rate

1 year US \$25 New Member Fee for student rate is US \$5

Student Membership: Full-time students must submit a photocopy of a student ID card and a copy of a current transcript or course schedule. Memberships are nonrefundable.

Payment of membership dues concurs adherence to the BICSI Articles of Incorporation, Bylaws, Code of Ethics, and other rules and regulations duly established by the BICSI Board of Directors.

Note: Membership fees are subject to change without notice. Memberships are based on a 12-month cycle and end on the last day of the month joined, in the year the term expires. Student memberships shall not count toward the achievement of district or region status and will not have voting rights, but are eligible for membership benefits made available to BICSI members from time to time.

Payment

All funds payable in US Dollars. (Contact BICSI's Global Support & Development Department for instructions on wiring funds.) For your protection, BICSI does not accept emailed credit card numbers. If paying by credit card, please mail or fax (+1.813.436.5422) your payment information instead.

Total to be paid

\$ _____

- Check or Money Order Enclosed
- Visa MasterCard American Express Diner's Club Discover

Internal Use Only

Cardholder name (as the name appears on the credit card) Cardholder signature

Credit card number CVV Expiration date Card billing zip/postal code (required)