



IAAP MEMBERSHIP APPLICATION

10502 NW Ambassador Drive Kansas City, MO 64195-0404 Phone: 816-891-6600

Fax: 816-891-9118 Email: membership@iaap-hq.org. Website: www.iaap-hq.org

MEMBERSHIP APPLICATION

PLEASE PRINT OR KEY ALL INFORMATION

LAST NAME FIRST NAME M.I.

SEND ALL CORRESPONDENCE TO:

HOME

OFFICE

JOB TITLE

HOME ADDRESS

COMPANY NAME

CITY

PROVINCE

WORK ADDRESS

POSTAL CODE

COUNTRY

CITY

PROVINCE

BIRTH DATE (mm/dd/yy)

GENDER

POSTAL

COUNTRY

HOME PHONE

HOME E-MAIL

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BUSINESS PHONE

FAX

WORK EMAIL

ADDITIONAL INFORMATION

How did you hear about IAAP?

Website
OfficePro

IAAP Member
Seminar/Workshop

Mailing
Other

TYPE OF MEMBERSHIP

Select the membership option that best serves your needs and return this form with payment.

Note: These amounts are in US Funds.

PROFESSIONAL: A currently employed (within the last two years) administrative professional, a holder of the CPS/CAP rating or an employed teacher of business education.

	Processing Fee*	Annual IAAP Dues	Chapter Dues	Division Dues	TOTAL
PROFESSIONAL	\$15	\$83	\$15	\$20	\$133 US

STUDENT: A full-time student in business education. Maximum 4 years allowed.

STUDENT	\$15	\$50	\$5	\$5	\$75 US
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ASSOCIATE: An individual, firm or educational institution that sustains the objectives of IAAP. For business or institution, provide name and address of contact person.

ASSOCIATE	\$15	\$180	\$36	\$0	\$231 US
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* This is a one-time fee. Renewal rate does not include a processing fee.

NAME OF IAAP CHAPTER **Edmonton Chapter**

CHAPTER NO. **603120**

DIVISION NO. **603000**

RECRUITED BY

ID NO.

METHOD OF PAYMENT

MAKE CHEQUE PAYABLE TO "IAAP"

Payment required for processing. Rates are in US funds and must be paid for in US funds. Credit card payments are processed using bank's exchange rates.

Make Cheque Payable to: IAAP

Please return completed form & payment to:

Headquarters (address above)

or Apply Online at www.iaap_hq.org

Any questions, contact:

Hilary Allbon - Membership Chair, Edmonton Chapter

Tel: (780) 451-7666

Email: hallbon@shaw.ca

Website: www.iaapedmonton.com

HEADQUARTERS USE ONLY	
ID	
Mbr Type	Status
Join Date	Exp Date
Chapter No. 603120	Division No. 603000
Total Amount Paid \$	
Processing \$	IAAP Dues \$
Chapter \$	Division \$
Prepay Acct. #	Prepay Amount \$
Source Code	Check No.

Amount:

AMEX

MasterCard

VISA

Credit Card #:

Expiry Date:

Signature of Card Holder

Print Name of Card Holder