Membership Application Form

☐ Membership Renewal
☐ New Member
☐ UIC Alumni

Basic Information

*First Name _____

*Last Name _____

Preferred Name _____ (What name do you like to go by?)

*(non-UIC) E-Mail Address _____

Phone Number _____

University Enrollment

*College _____   *Major _____

*Expected Graduation Date _____

*UIC NetID _____   ☐ I am currently NOT a student of UIC

ACM Server/Web Account

*Desired Account Name _____

By signing your name here, you attest to the fact that all information provided on this form is correct to the best of your knowledge

*Signature _____   *Date _____

To complete this application, please include the $10 ACM annual student chapter membership fee, or proof of paid national ACM membership, and bring this form to the ACM office (SELE 2264) and give it to an ACM Officer.

We will notify you via e-mail once your application has been processed!
*Required

ACM Office use only

Sysadmin sign off _____
Treasurer sign off _____

☐ Money Received ☐ Application processed