



Arizona Chapter of the International Society for Performance Improvement

Membership Application

Name _____
 Address _____
 City/State _____
 Zip code _____

Title _____
 Employer _____
 Work Address _____
 Work Phone _____
 Home Phone _____
 Fax _____
 Email _____
 Designation: HPT CPT Other: _____

Fees for Yearly Membership (check one)*

Monthly Meetings

<input type="checkbox"/> Active member	\$50.00	Active member	Free
<input type="checkbox"/> Student	\$25.00	Student	\$5.00
		Non member	\$10.00

Getting Involved

Our members help make us strong. Please indicate how you can contribute to the chapter:

- My organization could provide low-cost facilities or equipment for ISPI programs.
- I would be interested in presenting at a chapter meeting.
- I would be interested in serving on the board.
- I would be interested in volunteering for special events.

Please complete this membership application and mail it along with the fee to:

AZISPI
PO Box 12408
Chandler, AZ 85248

Topics you would like to see presented at future meetings:

*Fees are used to provide food and supplies for the meeting and help with expenses for presenters.