



NEW/RENEWAL APPLICATION FOR STUDENT CLUB AFFILIATION

The Club requests student affiliation with a Chapter of Meeting Professionals International.

| FACULTY ADVISOR | | |
|------------------------|-----------------|--|
| NAME: | | |
| TITLE: | | |
| COLLEGE/ UNIVERSITY | | |
| DEPARTMENT | | |
| ADDRESS: | | |
| CITY: | STATE/PROVINCE: | |
| POSTAL CODE: | COUNTRY: | |
| PHONE: | FAX: | |
| E-MAIL: | WEB: | |

☐ I agree to serve as the recognized liaison between the educational institute and this student club and I am aware of the Student Club Operational Guidelines.

SIGNATURE: _____ DATE: _____

| CLUB PRESIDENT | | | |
|-------------------------|----------|-----------------|--|
| NAME: | | MPI ID: | |
| COLLEGE/ UNIVERSITY: | | | |
| ADDRESS: | | | |
| CITY: | | STATE/PROVINCE: | |
| POSTAL CODE: | COUNTRY: | | |
| PHONE: | | E-MAIL: | |

| MPI STUDENT CLUB DEVELOPMENT (mm/dd/yr.) | |
|--|--|
| FIRST MEETING WITH FACULTY ADVISOR: | |
| | |

SUPPORTING DOCUMENTATION

The following documentation must be submitted with this application. Failure to submit all required documentation will delay the processing of this application.

- ☐ MPI Student Club Operational Guidelines (Document #1)
- ☐ Letter from faculty advisor consenting to serve as an advisor and confirming educational institute support
- ☐ Letter from MPI chapter officer/administrator confirming support of the student club
- ☐ Student Club board of directors' roster (Document #3)
- ☐ Names and MPI ID's of 10 students

DISCLAIMER AND SIGNATURE

I certify that the information contained within this application is accurate and complete to the best of my knowledge.

PRINTED SIGNATURE

Student Club President

TITLE

SIGNATURE

Student Club President

DATE

PRINTED SIGNATURE

Student Club Chair/Director

TITLE

SIGNATURE

Student Club Chair/Director

DATE

Submit your materials to
MPI GLOBAL AT:

2711 LBJ FREEWAY, SUITE 600
DALLAS, TEXAS 75234

OR EMAIL TO: vschaefer@mpi.org

QUESTIONS?

Contact MPI at 972.702.3000 or
via e-mail at vschaefer@mpi.org

FOR MPI INTERNAL USE ONLY

Date Received: _____ Date Verified: _____

Verified By: _____ ID: _____

Charter Date: _____