CREDIT PROFESSIONALS INTERNATIONAL STUDENT MEMBER DATA FORM

First Name:		Middle Initial:		
Last Name:	Suffix:	Informal Name: _		
I attend (check one): <u>High Schoo</u>	<u>ol</u>	Community College	<u>College</u>	
Grade level: Freshman Sophomore	_ Junior	Senior Grad Stude	nt	
Name of School				
Home Address:		Why I want to join Credit Pr		
Street Address or PO Box				
City, State, and Zip	_			
() Home Phone Number	_			
Cell Phone Number	_			
E-mail Address	_			
Age range:				
□ 14-18				
□ 19-30				
□ Over 30				
How did you find out about CPI? What year did you join CPI?				
Spouse's Name Birthday (month and day)				

Please return this form to:

Credit Professionals International 10726 Manchester Road, Ste. 210 St. Louis, MO 63122 Phone: 314-821-9393 Fax: 314-821-7171

e-mail: creditpro@creditprofessionals.org