

**CREDIT PROFESSIONALS INTERNATIONAL
STUDENT MEMBER DATA FORM**

First Name: _____ Middle Initial: _____

Last Name: _____ Suffix: _____ Informal Name: _____

I attend (check one): High School _____ Community College _____ College _____

Grade level: Freshman___ Sophomore___ Junior___ Senior___ Grad Student___

Name of School _____

Home Address:

Street Address or PO Box

City, State, and Zip

(_____) _____
Home Phone Number

(_____) _____
Cell Phone Number

E-mail Address

Why I want to join Credit Professionals Int'l.

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
PO Box 220714
St. Louis, MO 63122
Phone: 314-821-9393**

e-mail: creditpro@creditprofessionals.org