



# California Society of Tax Consultants

## APPLICATION FOR STUDENT MEMBERSHIP

**Student.** Persons enrolled in a tax or accounting class/program but not actively engaged in the profession of tax preparation or accounting. Student member shall have all the privileges of membership except that of voting and holding office.

Student Membership is \$50.

### STATEMENT OF COMPLIANCE

I am not actively engaged in the profession of tax preparation or accounting (Initial) \_\_\_\_\_

I am currently enrolled in \_\_\_\_\_  
Course Name

I would like to be a member of the \_\_\_\_\_ chapter.

### Payment Information:

Check/CC#: \_\_\_\_\_

Exp. \_\_\_\_\_ CID/CVV2: \_\_\_\_\_

### Billing/Shipping Address

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Date Approved: \_\_\_\_\_