

Membership Code
(Officer Use Only)

**Application Form for Candidate Membership
of
Beta Alpha Psi, Victoria University of Wellington Chapter**

Name		Sex	Male / Female
Major		Date of Birth	
Email		Mobile	
What Degree Are You Pursuing?		Which Year of the Degree Are You In?	
Average Grade of Your Major		Average Grade of All Papers	
Where Did You Learn About BAP@VUW			
Announcement	<p style="text-align: center;">I, _____, hereby apply to become a member of the above named incorporated association. In the event of my admission as a member, I agree to be bound by the rules of the association for the time being in force.</p> <p style="text-align: center;">Signature:</p> <p style="text-align: center;">Date:</p>		