



BURSARS' ASSOCIATION OF JAMAICA

P.O. BOX 76, KINGSTON 10, JAMAICA
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WWW.BURSARSJA.COM

APPLICATION FOR MEMBERSHIP

| | | | | | |
|--|-----|-----|----------------------------|-----------|-------|
| PARTICIPANT INFORMATION: | | | NEW | RETURNING | |
| TITLE: | DR. | MR. | MISS | MRS. | OTHER |
| LAST NAME: | | | | | |
| FIRST NAME: | | | | | |
| MIDDLE NAME: | | | | | |
| GENDER: | M | F | DATE OF BIRTH (DD MM YYYY) | | |
| NEXT OF KIN: | | | RELATION | | |
| CONTACT FOR NEXT OF KIN: | | | | | |
| MEMBER MAILING ADDRESS: | | | | | |
| E-Mail ADDRESS: | | | | | |
| CELLULAR PHONE: | | | OTHER PHONE: | | |
| CURRENT POSITION: | | | | | |
| SCHOOL EMPLOYED: | | | SCHOOL ADDRESS: | | |
| SCHOOL PHONE/ FAX NUMBER: | | | EMAIL ADDRESS: | | |
| FEE: (1% OF GROSS) | | | | | |
| "I hereby pledge to abide by the Constitution and Code of Ethics of the <i>Bursars' Association of Jamaica</i> " | | | | | |
| SIGNATURE: | | | | DATE: | |

MEMBERSHIP IS GRANTED ON APPROVAL BY THE EXECUTIVE OF THE *BURSARS' ASSOCIATION OF JAMAICA.*

FOR OFFICIAL USE:

| | | | | | |
|------------------------|----------|----|--------------------------|------|----|
| FEES PAID: | YES | NO | PROOF OF EMPLOYMENT : | YES | NO |
| SIGNED CODE OF ETHICS: | YES | NO | CONSTITUTION: | YES | NO |
| MEMBERSHIP: | | | REASON FOR NOT GRANTING: | | |
| BAJ OFFICIAL: | POSITION | | SIGNATURE | DATE | |