Academic Society Dues / Fees

Society's Name: _____
Advisor:_____
Student Contact: _____
Contact BYU-Idaho email: _____
Account Number (if known): _____
Society Dues/Fees: $_____

Once complete, please submit this form to the Office of Faculty Development in McKay 172.

NOTICE: By circling "Yes" and signing your name you accept that BYU-Idaho may charge your BYU-Idaho account for the specified amount indicated above.

Name (Print Legibly)	I-Number	BYU-Idaho Email	I allow BYU-Idaho to charge my account.	Signature
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	

Name (please print)	I-Number	BYUI Email	Charge account?	Signature
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	
			Yes No	