



New Student Membership Verification Form

Revised May 2017

Student

Student Name: _____

Student ID Number: _____ Effective Term: _____

Personal Address: _____

City: _____ State: _____ Zip Code: _____

Chamber Member Business: _____

Business Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____ E-mail: _____

Member Business Employee's Name: _____

Student's Relation to Member Business: Employee Spouse Child

By checking this box, I confirm that my child (the student) is a dependent:

Business

The above named student is a full time employee, spouse or child of a full time employee of:

Name of Chamber Member Business:

Authorized Signature of Business Member *Title*

Chamber

The above named business is an active Member of the Greater Decatur Chamber of Commerce.

Authorized Signature of Greater Decatur Chamber of Commerce *Title*

Date

Member must submit a copy of this signed verification form to:
 Greater Decatur Chamber of Commerce
 101 S Main Street, Suite 102 • Decatur, IL 62523
 mark.sturgell@decaturchamber.com

Once Membership Verification form is authorized it will be forwarded to:
 Benedictine University at Springfield, Student Accounts, Attn. sdoddek@ben.edu

Completion of this process is based upon admission into Benedictine University at Springfield's School of Graduate, Adult and Professional Education. Not all degree programs qualify.

Students must verify every academic year (June through May) that they or their employer is a current Chamber Member.