



PSI CHI. THE INTERNATIONAL HONOR SOCIETY IN PSYCHOLOGY

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DO NOT WRITE IN THIS SPACE

CHARTER NUMBER:

SHIPPED:

UPS1 UPSG PO

DATE MAILED

registfrm [11/09]

Registration Form

Name of chapter [school]		State/Country
Induction Date ¹ Month/Date/Year	Were these members entered online? <input type="checkbox"/> Yes <input type="checkbox"/> No	Typed list attached <input type="checkbox"/> Yes <input type="checkbox"/> No
New Faculty Advisor? <input type="checkbox"/> Yes ² <input type="checkbox"/> No	Faculty Advisor Name	
Phone Number	Email	

Registration fees

Number of registration fees at \$45 each totaling: _____ X 45 =	\$
Number of complimentary lapel pins requested: _____	
Expedited shipping, \$30 for 2 day delivery , continental U.S. Expedited shipping fee for outside continental U.S. is \$35	\$
One chapter check or one money order made payable to Psi Chi in the amount of	TOTAL \$

Allow **15 business days** from date received by Central Office for delivery unless **EXPEDITED** charges are included.

Enclosed with this form:

Number of registration cards (top halves; bottom halves are for chapter files) enclosed. ³	
Attach to this form a numbered computer printout of new member names using the format shown at the bottom of this form. Handwritten names on this form will no longer be accepted. Please check the list for accuracy. If a name is submitted incorrectly spelled, the chapter (not the individual member) is responsible for ordering and paying for replacements. Replacement certificates are \$10 and cards are \$2.00 .	List attached <input type="checkbox"/> Yes <input type="checkbox"/> No

Certificates and cards will be mailed to the faculty advisor at the chapter address ONLY.

Please indicate if there has been a chapter address change in the space below.

Signature of faculty advisor Date	Chapter address (change only)
_____ + _____ = _____ current additional copies total copies of members for new members Eye on Psi Chi	

Please use the sample layout below as a guide for listing new inductees.

Chapter: Your School Name			Date of Induction: [mo/day/yr] 10/20/08		
First Name	Middle name or initial	Last Name	Email address	Student ID Number	Estimated date of graduation [mo/yr]
1.					
2.					

SAMPLE ONLY

TRACK #

New memberships will **not be processed** until payment (**payable to Psi Chi**) is received.

If submitting by mail, your payment options include one chapter check, one money order, or a purchase order per submission. Individual student checks will not be accepted.

If submitting online, chapter can enter new members and pay for them through Psi Chi's secure website using a credit card or PayPal account.

A fee of **\$10** will be charged for any returned checks.

NOTE: If using any service other than the post office, please send to Psi Chi street address.

¹ If no induction date is listed on this form, the date received will be used as the induction date listed on the new certificates.

² New advisors should complete and include New Faculty Advisor Form.

³ If members are entered online, it is not necessary to forward registration cards.

IMPORTANT:
Attach COMPUTER PRINTOUT of all new inductees to this form or enter members online.