



Membership Application
2017-2018

Name: ID# Grade:
Email Address: Cell Phone:
Parent Email Address:
Shirt Size DOB

Other activities you are involved in:

Students will have the opportunity to earn money to pay for events by participating in fund raising efforts.

I agree to abide by all rules and regulations set forth by DECA for the local, state and national chapters. I will have my membership dues turned in by September 22, 2017 to Mrs. Heinze in room 325.

Signature Date

If you have any questions please contact Mrs. Heinze, DECA Advisor and Marketing Instructor in room 325.

Which CCHS DECA Member Recruited You:

Date Form Turned In: Date Dues Paid: Receipt Attached: