

# Request for Membership Approval

**Organization Name:**

**Address:**

**FOP:**

**Amount of Annual Membership Dues: \$**

**Membership Time Period:** \_\_\_\_\_ through \_\_\_\_\_

**Membership Representative(s)**

**College/Department**

**What benefit will the university receive from membership in this organization?**

**Name and title of requestor:**

**Signature of requestor:** \_\_\_\_\_

*When this form is completed, please scan and attach to your TechBuy requisition or route the form to Purchasing & Contracting, MS#1094*

**Approval:** \_\_\_\_\_

Director of Procurement Services