



# ICSC Student Membership Application

### Student Member Eligibility requirements:

- Must be a full-time undergraduate or graduate student who is not otherwise employed, except on a part-time or temporary basis (i.e., internship).
- Undergraduates taking at least 12 credits and graduate students enrolled in at least 6 credits in semester-based academic programs at an accredited institution are considered full-time students.
- Submission of photocopied class schedule (or transcript) as evidence of fulltime status is required along with completion of this student application.

For those not in a semester-based academic program, contact Michael Cowden, Student Engagement Director, at [mcowden@icsc.org](mailto:mcowden@icsc.org) or +1 202 626 1408 to discuss eligibility

First Name \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name \_\_\_\_\_

Name of College/University \_\_\_\_\_ Faculty/Staff Advisor \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Country \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Telephone \_\_\_\_\_ Fax Number \_\_\_\_\_ Email \_\_\_\_\_

Current Curriculum \_\_\_\_\_ Month/Date of Graduation \_\_\_\_\_

**REQUIRED FOR NON-U.S. APPLICANTS:** \_\_\_\_\_  
 Date of Birth \_\_\_\_\_ Country of Citizenship \_\_\_\_\_

**I AM APPLYING FOR STUDENT MEMBERSHIP**

**NOTE:** Following graduation, you will no longer be able to renew through the student membership program, but will retain the membership through the expiration date. If, after graduation, you are qualified to continue membership in another membership category, you will be contacted by ICSC staff and instructed accordingly. This category does not renew automatically. You will be asked to provide documentation each year.

**Have you ever been a member of ICSC?**  Yes  No

**Student Membership Dues:** \$50.00

**Terms and Conditions:** This Membership Application is subject to the ICSC Membership Terms and Conditions available at <https://www.icsc.org/attend-and-learn/events/icsc-terms-and-conditions-for-advertising-events-exhibit-space-and-sponsors#membership>, which are hereby incorporated by reference.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

**Membership dues MUST accompany application**

Check Enclosed (made payable to ICSC) Mail application and check to address below.

Charge My  Mastercard  VISA  American Express  Discover **Total** \_\_\_\_\_

Name (as it appears on card) \_\_\_\_\_ Signature of Cardholder \_\_\_\_\_

Credit Card Number \_\_\_\_\_ Expiration Date (month/year) \_\_\_\_\_

**Return the completed application with payment to:**

**Email:** [membership@icsc.org](mailto:membership@icsc.org)

**Mail:** International Council of Shopping Centers  
 P.O. Box 419822  
 Boston, MA 02241-9822, USA

**FOR ICSC USE ONLY:** Individual ID \_\_\_\_\_