

CJA REGISTRATION

PLEASE PRINT **Return Form to Criminal Justice Office Brandt 329 with payment**

Date _____

Name _____

Cape Address _____

Permanent Address _____

Local phone number _____

Email Address _____

Criminal Justice Major (please circle one)? Yes No

If not, what is your major? _____

Class: Freshman ___ Sophomore ___ Junior ___ Senior ___ Graduate ___

Please indicate committees you would be willing to dedicate time and effort to:

- ___ Trips
- ___ Homecoming Tailgate
- ___ CJ Day (Career Fair)
- ___ Social Events
- ___ Service Events
- ___ Fund Raising

Comments (activities you would like to do this year):

Dues: \$12.00 for one semester or \$20.00 for two semesters
(Please make checks payable to CJA)