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EIN: 39-1768969 – 501 (C) (3)

African American Chamber of Commerce of Greater Milwaukee

-- Good for business, good for Milwaukee

APPLICATION FOR CONSUMER/PARTNER STUDENT MEMBERSHIP

COST \$25

Contact Person _____ Sex M F Graduation Year _____

College Name _____ High School _____

Email Address _____ Cell _____

Home Address _____

City _____ State _____ Zip _____

Facebook name _____ Fax _____

Dorm Address _____

Dorm City _____ State _____ Zip _____

Area of Study _____

Do you have a business? _____ What is the name of your business? _____

Would you like a summer internship? _____ Are you interested in a part time job? _____

On the three lines below, write in a description of your business or your personal internship goals

(OPTIONAL)

EDUCATION RELATED INFORMATION

Best Subjects _____ Grades _____ Available to tutor others _____

ETHNICITY

African American Caucasian Hispanic Native American Asian Mixed race

COMMENTS

MEMBERS – BECOME DECISION MAKERS!