



**Payment Method**

Payment must accompany this application; purchase orders cannot be accepted to activate a chapter. If your school requires an invoice to issue payment, please email [info@chialphamu.com](mailto:info@chialphamu.com) to make arrangements.

Please make checks payable to: **Chi Alpha Mu**

If your chapter wishes to pay by credit card, please call the National Office to pay the \$15 charter fee over the phone.

**Signatures**

I, \_\_\_\_\_, approve the contents of this petition and confirm that I will establish a chapter of Chi Alpha Mu, the National Junior Mathematics Club, at this school.  
(name of sponsor)

\_\_\_\_\_  
Signature of sponsor

\_\_\_\_\_  
Date

I, \_\_\_\_\_, approve the chartering of a Chi Alpha Mu, the National Junior Mathematics Club.  
(name of principal)

\_\_\_\_\_  
Signature of principal

\_\_\_\_\_  
Date

**MAIL, FAX OR EMAIL THIS COMPLETED PETITION TO:**

Chi Alpha Mu  
c/o University of Oklahoma  
3200 Marshall Ave, Ste 190  
Norman, OK 73019

**Fax:** 405-325-7184 **Email:** [info@chialphamu.com](mailto:info@chialphamu.com) **Phone:** 405-325-0144 **Website:** [www.chialphamu.com](http://www.chialphamu.com)