

## Organization MEMBERSHIP FORM

Last Name		First Name		Middle Initial
Address				
City		State		Zip Code
Home Phone		Work Phone		Cell Phone
FAX Number		Email address		
Name of Organization				
		City	State	Zip Code
Tradioss		City	State	Zip couc
Home Phone	Work Phone	FAX N	Number	Email Address
1-100 members 101-200 members 201-300 members 301+ members		\$75.00 150.00 325.00 400.00	2 votes 4 votes 8 votes 11 votes	
Total Number of M	lembers			
□ New Organizationa	al Membership	□ Renewing O	rganization	
□ Check \$	□ Cash	Other		
tef. # Sum	mary Sheet Date _	// Me	mbership E	xp
Cash □ Ch	eck (√ No	_)0	ther	
		Date Receive	ed:/	_/
	Address  City  Home Phone  FAX Number  Name of Organization  Address  Home Phone  1-100 members 101-200 members 201-300 members 301+ members Total Number of M.  New Organizationa  Check \$  ef. # Summark  Cash □ Check	Address  City  Home Phone  FAX Number  Name of Organization  Address  Home Phone Work Phone  1-100 members 101-200 members 201-300 members 301+ members  Total Number of Members  I New Organizational Membership  Check \$ Cash  Ef. # Summary Sheet Date _	Address  City  State  Home Phone  Work Phone  Email address  Name of Organization  Address  City  Home Phone  Work Phone  FAX Number  1-100 members 150.00 201-200 members 201-300 members 325.00 301+ members  Total Number of Members  □ New Organizational Membership □ Renewing O □ Check \$ □ Cash □ Other  ef. # Summary Sheet Date / _ / _ Me  Cash □ Check (√No) □ O	Address  FAX Number  Email address  Name of Organization  Address  City  State  Home Phone  Work Phone  FAX Number  1-100 members 101-200 members 150.00 4 votes 201-300 members 325.00 8 votes 301+ members  Total Number of Members  New Organizational Membership  New Organizational Membership Check \$ Cash Other  ef. # Summary Sheet Date/_/ Membership Exercises  Cash  Check (√No)  Other



Please make check payable to NCESP and mail to: NCESP NEA Center for Governance 1201 Sixteenth Street, NW, Suite 813 Washington, DC 20036

**Note:** Only checks and money orders are acceptable payments through the mail. **Please do not send cash.** Please make a copy of this form for your records before mailing. If you have additional questions or would like to request an Organizational Membership form, please call the Center for Governance at 202-822-7173.