

Region# \_\_\_\_\_  
Transmittal# \_\_\_\_\_

\_\_\_\_\_ NAESP Membership  
\_\_\_\_\_ NASSP Membership

FOR OFFICE USE ONLY

**NEW HAMPSHIRE ASSOCIATION OF SCHOOL PRINCIPALS, NAESP AND NASSP  
2011-2012 JOINT MEMBERSHIP APPLICATION**

**(Please note: NHASP only needs one purchase order/check to process both state and national dues)**

Member Name: \_\_\_\_\_ Position: \_\_\_\_\_  
School Name: \_\_\_\_\_ School Phone# \_\_\_\_\_  
School Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_  
School Fax# \_\_\_\_\_ Home Phone# \_\_\_\_\_  
Home Address: \_\_\_\_\_  
E-Mail address \_\_\_\_\_  
SAU # \_\_\_\_\_ Website: \_\_\_\_\_  
 I want to participate in the ListServ  I do not want to participate in the ListServ

**Complete the DUES SECTION BELOW – Check membership category and title**  
(Please complete all the above information – One Membership Registration per form)

<p style="text-align: center;"><b>STATE MEMBERSHIP</b> <b>JULY 1, 2011 – JUNE 30, 2012</b></p> <p><input type="checkbox"/> <b>NHASP – STATE DUES</b> (select one)</p> <p><b>Full Member (1) .....\$485</b> <input type="checkbox"/></p> <p><b>Associate Member (2) .....\$250</b> <input type="checkbox"/></p> <p><b>Special Member (3).. .....\$ 75</b> <input type="checkbox"/></p> <p><b>Special Member Plus*.....\$360</b> <input type="checkbox"/></p> <p><b>Retired Member .....\$50</b> <input type="checkbox"/></p> <p>Includes:</p> <ol style="list-style-type: none"><li>Principal, Assistant Principal, Teaching Principal 50%, Department Head, Supervisor</li><li>Superintendent, Administrative Personnel, Education Agency, Assistant Superintendent</li><li>Aspiring Principals, Director/Coordinator, Title 1 Coordinator, Special Education Director</li></ol> <p><i>*Additional benefit of job counseling &amp; mock interview</i></p>	<p style="text-align: center;"><b>NATIONAL MEMBERSHIP</b> <b>JULY 1, 2011 – JUNE 30, 2012</b></p> <p><input type="checkbox"/> <b>NAESP– NATIONAL DUES</b> (select one)</p> <p><b>Elementary Active ..... \$235</b> <input type="checkbox"/></p> <p><b>Emeritus ..... \$118</b> <input type="checkbox"/></p> <p><b>Institutional Active Member*..... \$280</b> <input type="checkbox"/></p> <p><b>Aspiring Principal**..... \$ 80</b> <input type="checkbox"/></p> <p><b>Retired..... \$ 60</b> <input type="checkbox"/></p> <p><small>*1 Complete membership &amp; duplicate set of publications **Teacher, Grad. Student, Professor, Counselor</small></p> <p><input type="checkbox"/> <b>NASSP– NATIONAL DUES</b> (select one)</p> <p><b>Secondary Individual*..... \$242</b> <input type="checkbox"/></p> <p><b>Institutional Member**..... \$242</b> <input type="checkbox"/></p> <p><b>Educator*..... \$ 82</b> <input type="checkbox"/></p> <p><b>Retired***..... \$ 48</b> <input type="checkbox"/></p> <p><small>*Nontransferable **Owned by the school ***Open to retired active members</small></p>
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Total Due: \_\_\_\_\_ Master Card/Visa #: \_\_\_\_\_ Exp. Date \_\_\_\_\_  
PO#: \_\_\_\_\_ Billing Address: \_\_\_\_\_ 3 Digit Security Code \_\_\_\_\_

**RETURN THIS FORM VIA EMAIL WITH PO# OR CREDIT CARD INFORMATION TO: [NHASP@AOL.COM](mailto:NHASP@AOL.COM)  
OR MAIL FORM WITH PAYMENT TO:**

**NHASP, 2 Pillsbury Street, Suite 500A, Concord, NH 03301 or FAX 603-224-3766**

**PLEASE NOTE:**

**SEND ALL PAYMENTS (STATE & NATL) TO NHASP IN JUST ONE TRANSACTION**