



# Membership Enrollment Form 2009 - 2010



MESPA and NAESP Joint Membership

**Massachusetts Elementary School Principals' Association, Inc.**  
**Massachusetts Elementary School Principals' Education Foundation, Inc.**

28 Lord Road, Suite 125, Marlborough, MA 01752  
Phone: 508-624-0500 ~ Fax: 508-485-9965

PLEASE PROVIDE ANY CHANGES TO THE INFORMATION REQUESTED TO ENSURE THAT RECEIPT OF MEMBERSHIP BENEFITS ARE NOT INTERRUPTED

Please type or print

Name \_\_\_\_\_ Position \_\_\_\_\_

Work Email \_\_\_\_\_ Home Email\* \_\_\_\_\_

\*Emails sent to district email addresses are sometimes blocked. Since we use email to communicate with our membership on a regular basis, please provide us with your home email address to ensure that you are receiving our communications and all of your membership benefits. Home email addresses will be kept confidential. Thank you.

**SCHOOL:**

School Name \_\_\_\_\_ District \_\_\_\_\_

School Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

**HOME:**

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Preferred Mailing: \_\_\_\_\_ Home \_\_\_\_\_ School

If you are new to the profession as a principal/assistant principal, please check one:

\_\_\_\_\_ I am a first year principal/assistant principal. \_\_\_\_\_ I am a second year principal/assistant principal

If new, who referred you to MESPA?  
\_\_\_\_\_

Principals and Assistant Principals must join as Active Members.

- Active Membership MESPA/NAESP ..... \$490  
(unified - covers one individual)
- Associate Membership MESPA ..... \$225
- Associate Membership MESPA/NAESP ..... \$340
- Aspiring Membership MESPA ..... \$85
- Aspiring Membership MESPA/NAESP ..... \$155
- Retired Membership MESPA ..... \$35
- Retired Membership MESPA/NAESP ..... \$90
- Retired MESPA/Emeritus Membership NAESP ..... \$143

MESPA/NAESP membership dues are not deductible as a charitable contribution for federal tax purposes.

**CHANGE OF SCHOOL INFORMATION:**

(Please complete if you have changed, or will be changing, schools)

I was previously at \_\_\_\_\_

School in \_\_\_\_\_

My successor at that school is (if known):  
\_\_\_\_\_

I succeed at my present school (if known):  
\_\_\_\_\_

I will remit my payment by the following method:  Check # \_\_\_\_\_  P.O.# \_\_\_\_\_  Visa  MasterCard

**Required for Credit Card Payment:**

Card # \_\_\_\_\_ Verification Code: Last 3 digits in signature box \_\_\_\_\_

Signature \_\_\_\_\_ Expiration Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Name on Card (please print) \_\_\_\_\_

Billing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Fax or Mail Membership Form to:**

MESPA, Inc.  
28 Lord Road, Suite 125,  
Marlborough, MA 01752  
Phone: 508-624-0500  
Fax: 508-485-9965  
Email: mespa@mespa.org  
www.mespa.org

Please make all membership payments payable to:  
MESPA, 28 Lord Road, Suite 125, Marlborough, MA 01752  
(Tax Exempt # 222-710946)