

**Personal Information:** 





## **NSBA Council Membership Form**

First Name		MI		Last Name
Home Address:				
	Street			
	City	State/Province		Zip/Postal Code
Residence Phone: .			Fax:	
School District/Bus	siness Name			
School District/ Business Address:				
	Street			
	City	State/Province		Zip/Postal Code
Board Administrator:		Email Address:		
Annual Dues Op	tion:			
National American Indian/Alaska Native Council of School Board Members		□ Regular Membership (entitled to vote) \$75.00	Associate Membership (not entitled to vote) \$25.00	□ Friend (not entitled to vote) \$10.00
National Black Council of School Board Members		□ Regular Membership (entitled to vote) \$75.00	Associate Membership (not entitled to vote) \$50.00	Corporate (not entitled to vote) \$1000.00
□ National Hispa of School Board		□ Regular Membership (entitled to vote) \$75.00	Associate Membership (not entitled to vote) \$50.00	Corporate (not entitled to vote) \$1,000.00
Board Members	hips (applies to NBC an	d NHC membership only)		
		Board of Five ed to vote) \$300.00	□ Full Board of Seven (entitled to vote) \$375.00	□ Full Board of Nine (entitled to vote) \$525.00
		e valid once invoice is pai	d)	
□ Invoice my Scho □ Invoice myself	ool District/Business			

## Please mail membership forms to: equity@nsba.org

Business Office - National School Boards Association 1680 Duke Street, FL 2, Alexandria, VA 22314 Phone: 703-838-6722 Memberships are valid for one year.