MISSOURI ASSOCIATION OF EDUCATIONAL OFFICE PROFESSIONALS
Application for Affiliation – 2025-2026

Annual Affiliation Dues: **$10.00**

Make Check Payable to: **Missouri Association of Educational Office Professionals (MAEOP)**

MAIL TO: **Lisa Shelton**
Excelsior Springs School Dist. #40
300 W. Broadway
Excelsior Springs, MO 64024

If you have any questions,
Please contact Lisa at
816-630-9200 x 1115 or
lshelton@ga.essd40.com

Name of Association _____

President _____

Office Address _____ Zip Code _____

Home Address _____ Zip Code _____

Telephone (Home) _____ Telephone (Office) _____

Fax Number (Office) _____ E-Mail Address _____

President-Elect _____

Office Address _____ Zip Code _____

Home Address _____ Zip Code _____

Telephone (Home) _____ Telephone (Office) _____

Fax Number (Office) _____ E-Mail Address _____

Vice-President _____

Mailing Address _____ Zip Code _____

Telephone (Home) _____ Telephone (Office) _____

Secretary _____

Mailing Address _____ Zip Code _____

Telephone (Home) _____ Telephone (Office) _____

Treasurer _____

Mailing Address _____ Zip Code _____

Telephone (Home) _____ Telephone (Office) _____

Local MAEOP Membership Chairperson _____

Mailing Address _____ Zip Code _____

Telephone (Home) _____ Telephone (Office) _____

Number of Local Members _____ **Number of MAEOP Members** _____
Number of NAEOP Members _____ **Affiliated with NAEOP** _____

Completed by _____ Office Held _____

President's Term Expires: Month _____ Year _____ One Year Term ___ Two Year Term ___

PLEASE RETURN THIS FORM WITH CHECK MADE PAYABLE TO MAEOP

DATE _____ **SIGNED** _____