

**NORTH CAROLINA ASSOCIATION FOR MIDDLE LEVEL EDUCATION**  
(Formerly the North Carolina Middle School Association)  
**2018-2019 MEMBERSHIP APPLICATION**

Membership Type:    ☐ Institutional                      ☐ Individual  
                                 ☐ New                                      ☐ Renewal: Membership

**INSTITUTIONAL MEMBERSHIP:**

\_\_\_\_\_  
Name of School, Central Office, System, College or Organization

\_\_\_\_\_  
Building Level Coordinator (person who will receive NCMLE information for distribution)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Email

\_\_\_\_\_  
School Phone #

\_\_\_\_\_  
School Fax #

\_\_\_\_\_  
School System

**INDIVIDUAL MEMBERSHIP:**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Position

\_\_\_\_\_  
Telephone #

\_\_\_\_\_  
Preferred Mailing Address

\_\_\_\_\_  
Fax #

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
E-mail

\_\_\_\_\_  
School Affiliation (if applicable)

\_\_\_\_\_  
School System (if applicable)

**FEES:**

\$50.00 Individual

\$100.00 Institutional (1-20 teachers)

\$25.00 First year teaching in NC

\$120.00 Institutional (21-50 teachers)

\$25.00 College Student / Retired

\$150.00 Institutional (51+ teachers)

\$100.00 Central Office or Corporate Membership

**Amount Enclosed** \_\_\_\_\_

**Payment Method:**   ☐ Check    ☐ American Express    ☐ MasterCard    ☐ Visa    (Sorry—No Purchase Orders)

**Card #** \_\_\_\_\_ **Expir. Date** \_\_\_\_\_ **CC Security#** \_\_\_\_\_ **Signature** \_\_\_\_\_

Please return completed application to:

**NCMLE**

**PO Box 116**

**Canton, NC 28716**

**(910) 235-3761**

**membership@ncmle.org**

Please let us know if you need an updated W-9