



THE NATIONAL ASSOCIATION OF SECONDARY SCHOOL PRINCIPALS

AND

THE MARYLAND ASSOCIATION OF SECONDARY SCHOOL PRINCIPALS



Individual- \$336 _____

Institutional- \$336 _____

Associate- \$126 _____

Retired- \$90 _____

Available to all principals, AP's, and other School administrators. Individual members receive all NASSP and MASSP benefits. Membership is owned by the individual and is non-transferable. (NASSP \$226 MASSP \$110)

Eligibility and benefits are the same as the Individual. This membership is school-owned in the name of an individual and is covered as a professional development expenses by most districts. This membership is transferable and all materials are sent to the school (NASSP \$226 MASSP \$110)

Open to department heads, teachers, graduate students, and professors. Associate members receive all benefits except legal and liability coverage. Membership is non-transferable (NASSP \$76 MASSP \$50)

Open to previous active members who have retired and no longer hold an administrative position. Membership is non-transferable (NASSP \$50 MASSP \$40)

First time member- \$250
 Membership fee for any school administrator joining for the first time. Eligible for individual or institutional membership. All benefits are the same as individual and institutional. Non-transferable.

Your position _____ Title: Mr. ___ Ms. ___ Mrs. ___ Dr. ___ Other: _____

Name: _____

School Name: _____ District/County _____

School Address: _____

City: _____ State: _____ Zip Code _____

School Phone: _____ School Fax: _____ E-mail address _____

Home Address: _____ City _____ State _____ Zip Code _____

Year started in current position _____ (yyyy) Birth Date _____ (mm/dd/yyyy) Male _____ Female _____

White _____ Black _____ Asian _____ Hispanic _____ Multi-racial _____

(NASSP is beginning to compile data on the principalship since so many members are becoming eligible for retirement. The data will also be used to determine the type of membership benefits that can be offered)

Please choose an edition of Principal Leadership magazine: Middle Level _____ High School _____ Please send mail to Home _____ School _____

METHOD OF PAYMENT

Check made out to MASSP _____

Credit Card Personal _____ School/District _____
 Card Type: MasterCard _____ Visa _____ American Express _____

Account number: _____ Expiration Date _____

Cardholder signature _____

Printed name of cardholder _____

Billing address _____

MAIL PAYMENT and APPLICATION TO:

MASSP
3443 Walker Drive
Ellicott City, MD
21042-3723