NCCCC 2017 MEMBERSHIP APPLICATION

(Membership valid from January 2017 through December 2017)

| Name | |
|---|--|
| | |
| Job Position/Title | |
| | |
| College/University/Company | |
| | |
| Name of the Center of Early Childhood Campus Program | |
| | |
| Center or Office Address | |
| | |
| City State | Zip |
| | |
| Email Work Phone | Work Fax |
| Please check here if you do not want to be on the Member listsery, otherwise you will be included. | |
| | |
| | |
| MEMBERSHIP TYPE | |
| D Faculty Member | □ Single Center-Director Membership \$150 |
| Individual Member \$150 | Center Associate-Each additional member at |
| | the same center |
| □ Full-time Student/Retiree\$50 | Director's signature required to qualify for the Associate |
| Students must be enrolled in a minimum of 12 units as an | discount rate. Please note that a separate form must be completed for each Associate Membership. |
| undergraduate and 9 units as a graduate. Class schedule must be submitted with the application. | completed for each Associate Membership. |
| be sobilitied with the application. | Director's signature Date |
| | |
| | Total Due \$ |
| | |
| | |
| PAYMENT INFORMATION | MEMBER BENEFITS |
| Make checks payable to: NCCCC (NCCCC Tax ID# 39-1587614). | • All members receive: reduced conference rate, |
| Credit card payments may be faxed or phoned into the NCCCC office | listserv access, member's only access page on the |
| at (916) 790-8261. | website, resources and member rates to partner |
| | programs. |
| Card # 🗆 VISA 🗆 MC 🗆 American Express VCode* | |
| | Faculty and Single Center/Directors receive one vote |
| Cardholder Name Exp. Date | on board elections. Director members have the ability |
| | to add Associate members at a discounted rate. |
| Card Billing Street Address | National Coalition |
| | for Campus |
| City State Zip | Children's Centers |
| | Engage • Network • Advocate |
| Authorized Signature Date | |

National Coalition for Campus Children's Centers P.O. Box 6899 • Folsom, California 95763-6899 (916) 790-8261 (Phone and Fax) • tonyap@campuschildren.org