



PASCSD, educators impacting teaching and learning through leadership



PASCSD MEMBERSHIP APPLICATION

Last Name	First	M.I.	Mr./Mrs./Dr.
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CONTACT INFORMATION (PREFERRED ADDRESS FOR MAILINGS)

Street Address	Gender	Male <input type="checkbox"/>	Female <input type="checkbox"/>
City	State	ZIP	County
Work Phone	Primary E-mail Address		
Home Phone	Secondary E-mail Address		
Cell Phone	PASCSD Region	IU#	

WORK INFORMATION

School Name	District/Organization Name
Position and/or Title	

TYPE OF MEMBERSHIP REQUESTED ("X" ONE CHOICE)

Regular Member	\$65	Yes <input type="checkbox"/>	
Retired Member	\$26	Yes <input type="checkbox"/>	Retirement Date
Full Time Student	\$28	Yes <input type="checkbox"/>	College or University
Institutional Memberships (Same District, IU, college, university or organization)		\$300 – 5 members	Yes <input type="checkbox"/>
		\$360 – 6 members	Yes <input type="checkbox"/>
		\$406 – 7 members	Yes <input type="checkbox"/>
		\$464 – 8 members	Yes <input type="checkbox"/>
		\$504 – 9 members	Yes <input type="checkbox"/>
		\$55 each for 10 members or more	Yes <input type="checkbox"/> No. of members

SUBMISSION

Please complete, print and mail with payment to:

Dr. Jeffrey M. Taylor
 PASCSD Technology and Communications Coordinator
 116 Droad Lane
 Pittsburgh, PA 15237
taylorj@nhsd.net

All checks should be made payable to: PASCSD