



NJACAC

Membership Application

Membership Year: July 1, 2010—June 30, 2011
Please provide one application for each member!

Date: _____

First Name	M.I	Last Name	Work Title	
Institution		Email Address (used for NJACAC communication purposes only)		
Street Address		City	State	Zip Code
Telephone	Ext.	Fax		
Gender*	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Current member of the National Association for College Admission Counseling		
Ethnic Background*	<input type="checkbox"/> African American/Black	<input type="checkbox"/> Asian/Pacific Islander	<input type="checkbox"/> Puerto Rican	
	<input type="checkbox"/> Latino	<input type="checkbox"/> Native American	<input type="checkbox"/> White	<input type="checkbox"/> Other

**optional*

Please select one:

- Membership Renewal New Member Application

Please select one:

- New Jersey Member Out-of-State Member

New Jersey Members

Please check only one of the following:

- Secondary School Member (\$30)
- College or University Member (\$35)
- Educational Organization Member (\$50)
- Independent Counselor Member (\$35)
- Retired Member (\$15)
- Graduate Student Member (\$15)
(please visit www.njacac.org for eligibility & requirements)

Out-of-State Members

Please check only one of the following:

- Secondary School Member (\$35)
- College or University Member (\$40)
- Educational Organization Member (\$60)
- Independent Counselor Member (\$40)
- Retired Member (\$15)
- Graduate Student Member (\$15)
(please visit www.njacac.org for eligibility & requirements)

Total Due: _____ **Make check or purchase order payable to NJACAC (tax/employer ID# 22-291-8655)**

Apply Online at www.njacac.org

Membership Questions: membership@njacac.org

Please keep a copy of this application for your record and return the completed form to:

NJACAC
PO Box 206
Manasquan, NJ 08736