



JULY 1, 2017 - JUNE 30, 2018

INVOICE

MASSACHUSETTS SCHOOL ADMINISTRATORS' ASSOCIATION

33 Forge Parkway, Franklin, MA 02038

Tel: (508) 541-7997 • Fax: (508) 541-9888

Email: mssaa@mssaa.org • Website: www.mssaa.org

SCHOOL / SCHOOL DISTRICT BILLING INFORMATION

SCHOOL/ SCHOOL DISTRICT

STREET

TOWN

ZIP

TELEPHONE

EXT.

ACCOUNTS PAYABLE EMAIL

LIST ALL ADMINISTRATORS JOINING ON PAGE 2, AND INDICATE THE MEMBERSHIP(S) DESIRED.

TOTAL MEMBERSHIP FEE DUE:

Number of MSAA Memberships: _____ @ _____ = \$ _____
(see dues incentive chart for correct rate)

Number of NASSP Memberships: _____ @ \$250.00 each = \$ _____

Number of NAESP Memberships: _____ @ \$235.00 each = \$ _____

TOTAL FEE TO BE SUBMITTED \$ _____

Check enclosed: # _____ or Purchase Order # _____

DUES INCENTIVE PROGRAM

**** Limited to Administrators within a single school district who enroll at the same time ****

1 to 3 Administrators \$300 Each	4 to 6 Administrators \$290 Each	7 or more Administrators \$280 Each
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Make Checks Payable to: Massachusetts School Administrators' Association (or MSAA)

And mail to: 33 Forge Parkway
Franklin, MA 02038

Tax ID# 04-2642485

Please note: If submitting a purchase order, only one purchase order is needed to process MSAA, NASSP, and NAESP dues.

*MSSAA Professional Development Offerings, Legislative Updates and Educational News are emailed to members. **PLEASE PRINT LEGIBLY***

If additional space is needed, feel free to attach additional pages.

Please register the following individuals for membership				Membership Type		
				MSAA	NASSP	NAESP
1	Name: Title:	School: Email:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2	Name: Title:	School: Email:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3	Name: Title:	School: Email:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4	Name: Title:	School: Email:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5	Name: Title:	School: Email:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6	Name: Title:	School: Email:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7	Name: Title:	School: Email:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8	Name: Title:	School: Email:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9	Name: Title:	School: Email:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10	Name: Title:	School: Email:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11	Name: Title:	School: Email:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12	Name: Title:	School: Email:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13	Name: Title:	School: Email:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14	Name: Title:	School: Email:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15	Name: Title:	School: Email:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
COUNT OF MEMBERSHIPS BEING REGISTERED:						