

NPAECT

Northwest Pennsylvania Association for Educational Communications and Technology

Membership Application 2009/2010

Last Name:

First Name:

Home Address:

City,State,Zip:

Home Telephone:

Home E-Mail:

Professional Title:

Employer:

Business Address:

City,State,Zip:

Business Telephone:

Business E-Mail:

Please mail your \$15.00 regular membership fee or your \$5.00 student membership fee with this form to:

Ron Bennett
NPAECT Treasurer
13808 Old Rt. 19N
Waterford, PA 16441

Please Circle One

New Membership

Membership Renewal

Signature: _____

Date: _____