



# Individual Membership Application

Include my name and mailing address when selling mailing lists for dev ed purposes (default is YES):  
\_\_\_\_\_ YES \_\_\_\_\_ NO

To view NADE's Privacy Policy, follow the link from the NADE home page at [www.nade.net](http://www.nade.net).

New  Renewal of Mem. Number: \_\_\_\_\_  
Last: \_\_\_\_\_  
First: \_\_\_\_\_ MI: \_\_\_\_\_

Prefix:  Dr.  Mr.  Mrs.  Ms.  Sr.  
Gender:  Male  Female  
Ethnicity:  Black/African-American  Nat. Hawaiian/ Pac. Islander  
 Asian  White/Caucasian/Anglo  
 American Indian  Hispanic/Latino(a)  
 Alaskan Native  multiracial  
Empl. Category: (check only ONE)  
 FT Faculty  Consultant  
 PT Faculty  Corporate  
 Administrator  Retiree  
 Counselor  Grad Student  
 Advisor  other: \_\_\_\_\_  
 SI Leader/Tutor

Title: \_\_\_\_\_  
Inst. Level:  2-yr  4-yr  K-12  Corporate  other  
Inst. Type:  public  private  other

Optional Demographic Information

### WORK Address

### HOME Address

Institution	_____	_____
Department	_____	_____
Street 1	_____	_____
Street 2	_____	_____
City/State	_____	_____
ZIP	_____	_____
Country	_____	_____
Phone/Ext.	_____	_____
FAX	_____	_____
E-Mail	_____	_____

### SPIN Memberships

Membership in one SPIN is included free of charge in each membership; additional SPINs cost \$5 each.

<input type="checkbox"/> Adjunct Faculty	<input type="checkbox"/> Liberal Arts
<input type="checkbox"/> Administration	<input type="checkbox"/> Online Educator
<input type="checkbox"/> Advising/Counseling	<input type="checkbox"/> Peer Assistance Programs
<input type="checkbox"/> Brain-Compatible Education	<input type="checkbox"/> Reading
<input type="checkbox"/> English/Writing/ESL	<input type="checkbox"/> Science
<input type="checkbox"/> Integration of Basic Skills	<input type="checkbox"/> Technology
<input type="checkbox"/> Learning and Study Skills	<input type="checkbox"/> TRIO
<input type="checkbox"/> Learning Disabilities	<input type="checkbox"/> Workforce Development
<input type="checkbox"/> Mathematics	

### Payment Calculation

NADE's Federal ID is 43-1252344.

Membership Dues:  
Individual (\$50) \_\_\_\_\_  
Student (\$30) \_\_\_\_\_  
Retiree (\$25) \_\_\_\_\_  
SPINs (1<sup>st</sup> is free; \$5 each additional) \_\_\_\_\_  
Research Fund Donation \_\_\_\_\_  
Scholarship Fund Donation \_\_\_\_\_  
**Total:** \_\_\_\_\_

**Please complete this form and mail it and your check made out to NADE to:**

**NADE  
500 N. Estrella Parkway, Ste B2 PMB 412  
Goodyear, AZ 85338**

If this is a new membership, what motivated you to join NADE?

\_\_\_\_\_ recruited by : \_\_\_\_\_  
\_\_\_\_\_ other: \_\_\_\_\_