**Use this form to join/renew a membership, update information or order items. Complete this form and return with payment. The information you provide will be used by the NCSM office for member communication, mailing lists and the NCSM Membership Directory. Membership Dues are currently $85.**

**Please Print Legibly or Type**

First Name: __________________________ Middle: __________________________ Last Name: __________________________

This is my complete address: □ Home □ Work

Address: __________________________

City: __________________________ State: ______ Zip: ______ Country: ______

**Please check all that apply. I currently work as:** (Optional)

- □ State/Provincial Department of Education  □ Department Chair  □ Education Technology Provider  □ Building  □ Pre-Kindergarten
- □ Government Agency (NSF, DOE, etc.)  □ Grade-Level Leader  □ Pre-Service Educator  □ Teacher Leader  □ Professional Developer
- □ Member of Local Board of Education  □ Author  □ Publisher  □ Superintendent  □ Teacher
- □ District Mathematics Supervisor/Leader  □ Coach/Mentor  □ Other
- □ Principal  □ Consultant  □ Curriculum Leader/Specialist

**Since designations vary over time, check the one you feel best describes you:**

- □ African American/Black  □ Native American  □ Mexican American/Hispanic/Latino  □ Other
- □ Asian American  □ Pacific Islander  □ Bi-Racial/Multi-Racial

**Please check all that apply. I am a leader in mathematics education at the following levels:**

- □ National  □ University/College: Senior High School  □ Pre-Kindergarten
- □ Regional (more than one state/province)  □ Junior High/Middle School  □ Other
- □ State/Province  □ Elementary School

**Check the area you serve:**

- □ Rural  □ Suburban  □ Yes
- □ Urban  □ No  □ Under 25  □ 35-44

**Do you influence purchasing decisions?**

- □ Yes  □ No  □ 45-54  □ 25-34

**Age:**

- □ Yes  □ No  □ 55-64 and over  □ Under 25  □ 35-44

**Work Experience:**

- □ First year in position  □ 21-30 years in position  □ High percent poverty
- □ 2-5 years in position  □ over 30 years in position  □ High percent of English language learners
- □ 6-10 years in position  □ retired  □ Racial and ethnic diversity

**Which of the following characterize the community you serve?**

- □ High percent poverty  □ Racial and ethnic diversity  □ None of the above
- □ High percent of English language learners

**Membership Information:**

**NCSM Tax ID: #39-1556438**

- □ Visa  □ MasterCard  □ Check/Money Order (U.S. funds only)
- □ Discover Card  □ Purchase Order***

**Please check the NCSM website (mathedleadership.org) for eligibility requirements and forms.**

**Please return this form to:**

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6000 E. Evans Avenue 3-205
Denver, CO 80222
Phone: 303-758-9611; Fax: 303-758-9616
Email: office@ncsmonline.org; Web: mathedleadership.org

**TOTAL ORDER: $______**

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