



Individual Membership Application

FORMER MEMBER: ID #: _____ NEW MEMBER

PREFIX	FIRST NAME	M. I.	LAST NAME	NICKNAME
TITLE				DEPARTMENT
INSTITUTION NAME				(ACRONYM)
WORK ADDRESS				SUITE/FLOOR
CITY/STATE/ZIP				COUNTRY
HOME ADDRESS				APARTMENT/UNIT
CITY/STATE/ZIP				COUNTRY
OFFICE E-MAIL		OFFICE PHONE		OFFICE FAX
HOME E-MAIL		HOME PHONE		CELL PHONE

PREFERRED ADDRESS: OFFICE HOME PREFERRED E-MAIL: OFFICE HOME

DEMOGRAPHIC INFORMATION *(Collected to report aggregate statistical information. Personal information will not be released.)*

GENDER	RACE/ETHNICITY	HIGHEST DEGREE EARNED
<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Transgender <input type="checkbox"/> Prefer Not to Answer	<input type="checkbox"/> African American <input type="checkbox"/> Asian Pacific Islander <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Other _____ <input type="checkbox"/> Prefer not to Answer	<input type="checkbox"/> Associate <input type="checkbox"/> Bachelors <input type="checkbox"/> Masters <input type="checkbox"/> Post Masters Certificate <input type="checkbox"/> Doctoral/Terminal

YEAR OF FIRST FULL-TIME POSITION IN STUDENT AFFAIRS: _____ M/NUFP ALUM? YES NO

KNOWLEDGE COMMUNITIES *(Please select as many of the following KCs you would like to join as a NASPA member.)*

<input type="checkbox"/> Administrators in Graduate and Professional Student Services	<input type="checkbox"/> Gay, Lesbian, Bisexual & Transgender Issues	<input type="checkbox"/> Parent and Family Relations
<input type="checkbox"/> Adult Learners & Students w/ Children	<input type="checkbox"/> Health in Higher Education	<input type="checkbox"/> Spirituality and Religion in Higher Education
<input type="checkbox"/> African American	<input type="checkbox"/> Indigenous Peoples	<input type="checkbox"/> Student Affairs Development and External Relations
<input type="checkbox"/> Alcohol and Other Drug	<input type="checkbox"/> International Education	<input type="checkbox"/> Student Affairs Partnering with Academic Affairs
<input type="checkbox"/> Asian Pacific Islanders	<input type="checkbox"/> Latino/a	<input type="checkbox"/> Student Leadership Programs
<input type="checkbox"/> Assessment, Evaluation, and Research	<input type="checkbox"/> Men and Masculinities	<input type="checkbox"/> Sustainability
<input type="checkbox"/> Campus Safety	<input type="checkbox"/> New Professionals & Graduate Students	<input type="checkbox"/> Technology
<input type="checkbox"/> Disability		<input type="checkbox"/> Veterans
<input type="checkbox"/> Fraternity & Sorority		<input type="checkbox"/> Women in Student Affairs

- INDIVIDUAL DUES RATES** *(Please select the membership category – and any corresponding upgrade – that is most appropriate.)*
- \$63 PROFESSIONAL AFFILIATE** (Student Affairs Administrators or staff members at **member institutions**)
 - \$142 PROFESSIONAL WITH UPGRADE** (Professional Affiliates who want to receive the same information as voting delegates)
 - \$63 FACULTY AFFILIATE** (Fulltime teaching faculty)
 - \$142 FACULTY WITH UPGRADE** (Faculty Affiliates who want to receive the same information as voting delegates)
 - \$37 GRADUATE STUDENT AFFILIATE*** (Graduate Students who are not full time employees of any institution)
 - \$26 UNDERGRADUATE STUDENT AFFILIATE**** (*Sponsor Form must accompany application*)
 - \$50 EMERITUS AFFILIATE** (Former voting delegates, professional affiliates, or associate affiliates who are officially designated as retired by their institutions and who are no longer employed full time in higher education)
 - \$208 ASSOCIATE AFFILIATE** (Student affairs administrators at **nonmember** college or university campuses)

CARD NUMBER _____ EXP. DATE _____ VISA/MASTERCARD AMERICAN EXPRESS

CARD HOLDER'S NAME _____ SIGNATURE _____

Payment for the total amount in U.S. funds must accompany this form. Checks or money orders should be made payable to NASPA. Please return this form and payment to: NASPA CL ID# 500016 P.O. Box 5007, Merrifield, VA 22116-5007 or fax to (202)898-5737