

**MISSOURI ASSOCIATION OF SCHOOL BUSINESS OFFICIALS
MEMBERSHIP APPLICATION FOR EDUCATORS
(ACTIVE, EDUCATIONAL, & EMERITUS) 2010- 2011**

Name : (Dr., Mr., Mrs., Ms.) _____

School District: _____ Job Title: _____

Office Address: Street _____

City, State, Zip _____

Phone #: _____ Fax #: _____

Email Address: _____ County/District Code _____

As a part of the membership process, please check the appropriate category and respond to the committee question:

Membership Category:

____ Active \$50.00 ____ Educational \$50.00 ____ Emeritus (retired) \$15.00

Active – currently employed by a school district Educational- Employed by a college/university or non-profit educational organization

ASBOI membership Dues \$190.00 (ASBOI dues are yearly, based on the date that you paid your membership. If you wish to join ASBOI, include your ASBOI dues in your total and MoASBO will forward your payment to ASBOI)

ASBOI Dues \$ _____

Committees:

I am interested in serving on a MoASBO Committee: Yes No

Please check all that apply:

____ Membership ____ Legislative ____ Constitution & By-laws ____ Ad Hoc
____ Retirement ____ Spring Workshop ____ Audit ____ Resolution & Recognitions

Payment Options: Visa MasterCard or Check Enclosed Check No. _____

Card Holder's Name: _____

Account Number: _____ Expiration Date: _____ Security Code _____

Authorization Total Amount: _____ Date _____

Signature: _____

Payment must accompany application payable to MoASBO. Send to:

Mr. Mark Leech, Executive Director
3550 Amazonas Drive
Jefferson City, MO 65109

Phone – 573-644-7900 Fax -573-556-6270 Email mleech@moasbo.org

MoASBO dues are payable July 1 of each year. MoASBO operates on a fiscal year of July 1 – June 30.

Office use only: Received _____ Amount _____ Check # _____