

2020-2021 HEMSAA / NAESP

Membership Application

Name					Position	'	
School					School	District	
School Address							
City					State	HI	ZIP
School Phone							
School Info	Elementary	0	Middle	0	Other		
	Public	0	Private	0	Parochi	al	
Home Address					Home P	hone	
City					State	HI	ZIP
Preferred Addre	ess O Home	School					
Email			@	k12.hi.us	or		
Referred by (Per	rson who introduce	ed vou to HEN	ISAA / NAESP)				
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							to a consideration. Described to the all MATCH
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Return Application to: membership@naesp.org or Fax 703-549-5568 or mail

NAESP, 1615 Duke St., Alexandria, VA 22314-3483

Note: You will receive service upon payment. Please allow 4-6 weeks for initial receipt of publications. Membership is not transferable. See our website for individual benefits https://www.naesp.org/membership/membership-benefits