|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| DEPARTMENT:  |       | NORTH EAST SCHOOL DISTRICT | BUILDING:  |       |
| APPLICANT:  |       |  | DATE: |       |
|  | MEMBERSHIP/DUES |  |
|  | 810 |  |
|  |
|  |  |
| Organization Name | **New/Renewal** | **Membership Account Number** | **Unit – Yearly/Monthly/Weekly** | **Total****Cost** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| TOTAL THIS PAGE |  |
| **APPLICANT – Address & Zip Code:**  |  |
| **Telephone Number:** |  | **Fax:**  |  |  |
| **ORGANIZATION – Address & Zip:** |  |
| **Telephone Number:** |  | **Fax:**  |  |  |

|  |
| --- |
| **REQUEST REVIEWED BY DEPT. CHAIR: APPROVED: DISAPPROVED:­­­­**  **DATE:**   |
| **REQUEST REVIEWED BY PRINCIPAL: APPROVED: DISAPPROVED:­­­­**  **DATE:**   |
| NOTE: ALL INFORMATION IS NEEDED IN DETAIL BEFORE ORDER WILL BE PROCESSED. | Two copies distributed following administrative approval/funding: |
|  | 1. Department Chairperson |
|  | 2. Teacher |
| ACCOUNT CODE:  |       | Principal retains original copy. |

#