

# NCCHC

## 2009/2010 MEMBERSHIP APPLICATION

*Please type or print*

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Job Title: \_\_\_\_\_

College/Organization: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

*For Institutional Memberships Only*

Assistant Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**MEMBERSHIP CATEGORY** (circle one):

Institutional @ \$400

Individual @ \$125

Student @ \$25

*Note: The membership fee will not be prorated for part of the year.*

*You may also register at*

**[www.ncchc.com/membership/application.asp](http://www.ncchc.com/membership/application.asp)**

**Institutional Membership:** Community, Junior and Technical Colleges as well as similar collegiate institutions and organizations that qualify for institutional membership. Mailings/information will go to the representative (usually the campus president) noted on the membership application/renewal form. This level of membership allows your institution to send multiple representatives to the NCCHC Leadership Symposium and to the AACC Convention at the discounted rates.

**Individual Membership:** Trustees, faculty members, administrators and other staff members of institutions of higher education that qualify for institutional membership. Individual membership allows other institutional member representatives to receive mailings/information and website "members only" access in addition to the key contact person (if the institution is also a member). Individual memberships transfer to other schools with the individual. An individual membership also qualifies member to attend the NCCHC Leadership Symposium at the member rate even if the institution is not a member.

**Student Membership:** Currently enrolled students of institutions of higher education that qualify for institutional membership. Student memberships transfer to other schools. A student membership also qualifies member to attend the NCCHC Leadership Symposium at the member rate even if the institution is not a member.

*The annual membership year is from July 1 to June 30.*

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## MEMBERSHIP APPLICATION CONTINUED

New Member  Returning Member - Year Joined: \_\_\_\_\_

**Payment Method:**  Check  Credit Card  
Number (VISA/MC or AmEx): \_\_\_\_\_

Expiration Date: \_\_\_\_\_ ID# \_\_\_\_\_  
*(Note: ID# is last three digits on back of card)*

Check here if you need us to mail you a payment receipt.  
Allow two weeks.

Areas of expertise I would be willing to share with  
other NCCHC members:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please mail this completed form along with check (made out to  
NCCHC) or credit card payment to:

*Kimberly Andosca,*  
*Executive Director*  
NCCHC  
PO Box 1057  
*Valley Springs, CA 95252*

**Note: Please do not mail form without payment.**  
**We are unable to process your membership until**  
**payment is received.**



**FOR OFFICE USE ONLY:**

CK  
CC  
Ck # \_\_\_\_\_ Date \_\_\_\_\_  
Amount Paid: \$ \_\_\_\_\_  
Date Received: \_\_\_\_\_