**NCTE Student Affiliate Dues**

**BY SEPTEMBER 15, PLEASE SUBMIT THIS FORM PLUS NCTE DUES TO:**

**NCTE**

**PO Box 14054**

**St. Louis, MO 63178-4054**

**With “Affiliate Dues” written in the memo**

**STUDENT AFFILIATE DUES MUST BE PAID BEFORE YOUR NCTE DIRECTOR**

**(FACULTY SPONSOR) CAN RECEIVE THE MATERIALS FOR THE**

**ANNUAL MEETING OF THE BOARD OF DIRECTORS**

**NOTE:** Bylaws governing affiliate dues were set at the Annual Business Meeting, November 26, 1962.

For the current academic year, student affiliates pay dues according to the following schedule:

Student Affiliates ………………………………………. $2.50 US funds/student affiliate/year

**STUDENT AFFILIATE DUES SUBMITTED:**

**Full Name of Affiliate:**

**Number of Members:**

**Amount of Dues to NCTE (make check payable to NCTE):**

**Academic Year for Dues Submitted:**

**SUBMITTED BY:**

**Name:**

**Faculty Sponsor/NCTE Director:**

**Address:**

**Date:**

**FOR OFFICE USE ONLY**

**Check Number: \_\_\_\_\_\_**

**NCTE Account Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**