

**NREA Discounted Membership** *(Through NRCSA)*

2024-25 Membership Form

**Instructions:**

*Complete this form if your superintendent or district wants to become a member of the National Rural Education Association (NREA). NRCSA as a state affiliate of the NREA, is able to offer members a twenty-five (25%) discount on membership to the* ***NREA****. Please complete the form entirely, and submit to the NRCSA office via, mail, e-mail, or fax.*

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| **School District Name:** |  |

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| --- | --- |
| **Address:** |  |

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| --- | --- | --- | --- | --- | --- |
| **City:** |  | **St:**  | NE | **Postal Code:** |  |

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| --- | --- | --- | --- |
| **Phone Number:** |  | **Fax Number:** |  |

|  |  |
| --- | --- |
| **Administrator Name:** |  |
| **Administrator e-mail:** |  |

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| **Type of Membership:** |  |

*There are two different membership options. The discounted individual membership allows one (1) person to join the NREA at a cost of $75.00. The discounted school district membership allows a maximum of 7 people (board members or other staff) to join the NREA at a cost of $300.00.*

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| **Contact 1 Name:** |  | **Title:** |  | **e-mail:** |  |
| **Contact 2 Name:** |  | **Title:** |  | **e-mail:** |  |
| **Contact 3 Name:** |  | **Title:** |  | **e-mail:** |  |
| **Contact 4 Name:** |  | **Title:** |  | **e-mail:** |  |
| **Contact 5 Name:** |  | **Title:** |  | **e-mail:** |  |
| **Contact 6 Name:** |  | **Title:** |  | **e-mail:** |  |
| **Contact 7 Name:** |  | **Title:** |  | **e-mail:** |  |

**Please include a SEPARATE check for the membership fees payable to the NREA.**

**Send dues and registration form to:**

**NRCSA**

**440 S. 13th St, Suite B**

**Lincoln, NE 68508**