19 Mantua Road, Mt. Royal, NJ 08061 Phone: (856) 284-3700 • Fax: (856) 423-3420 • Website: www.ncme.org

MEMBERSHIP APPLICATION / RENEWAL FORM

(All Memberships Expire December 31)

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Company:	
Address: work home	
Address:	
City, State, Zip, Country:	
Phone: Fax:	
E-Mail:	
□ Please check this box if you would NOT like to be included in the NCME online Member Directory	
MEMBERSHIP DUES STRUCTURE Please check appropriate category. Active Member	TYPE OF ORGANIZATION Where are you currently employed? College or University School System State Agency Federal Agency Testing Organization R&D Organization Svaluation Agency Psychological Services Consulting Firm Independent Consultant Professional Licensing/Certification Agency Other: COMMITTEE INTEREST Annual Meeting Archives Awards Budget and Finance Diversity Issues and Testing Graduate Student Issues Membership Mission Fund Development Nominations and Elections Outreach Publications Social Media Standards Training and Prof. Development Website Management
CHARITABLE DONATION	
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Total Membership/Contribution Payment Amount: (include membership total from above):	
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