

RENEWAL NOTICE
ASSOCIATE MEMBERSHIP PROGRAM FOR SCHOOL ATTORNEYS (AMPSA)
2017-2018 Fiscal Year

Please enroll me in the Associate Membership Program for School Attorneys (AMPSA), which includes membership in the New Jersey Association of School Attorneys. I have enclosed a check made payable to "**New Jersey School Boards Association.**"

Please mail your check with this form to: **NJSBA, 413 West State Street, Trenton, New Jersey 08618, ATTN: Cindy Harrison.**

Category A: \$499.00 dues (\$492.00 to NJSBA and \$7.00 to N.J. Assn. of School Attorneys)

Members in Category A will receive:

- a) A password for Members Only portions of the NJSBA web site.
- b) Access to AMPSA e-mail group (List serve).
- c) Member rate for *Index to New Jersey School Law Decisions, PERC Index and The Negotiations Advisor.*
- d) Member rate for Association publications and programs.
- e) Association subscriptions.
- f) Member rate for Association/AMPSA programs.

Category B: \$399.00 dues (\$392.00 to NJSBA and \$7.00 to N.J. Assn. of School Attorneys)

Members in this group will receive all of the above except member rate for *Index to New Jersey School Law Decisions, PERC Index, and The Negotiations Advisor.*

Category C: \$199.00 dues (\$192.00 to NJSBA and \$7.00 to N.J. Assn. of School Attorneys)

This group is for new attorneys who have passed the bar in 3 years or less. They Will receive the member rate for Association AMPSA programs.

**AMPSA DUES RENEWAL
2017-2018 FISCAL YEAR**

NAME _____ YEAR ADMITTED TO BAR _____

LAW FIRM _____

ADDRESS _____

TELEPHONE _____

BOARDS REPRESENTED _____

E-MAIL ADDRESS _____

() Please check if you do **not** want your name, firm name, address, phone number and e-mail listed on NJSBA's AMPSA Web site.

<u>Attorney Name</u>	<u>Membership Category</u>	<u>Cost</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

TOTAL: _____