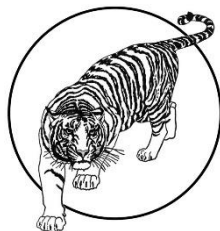


Who Should Fill Out This Form:

a) want to donate to NSDAA

b) not going to the NSDAA Conference 2019 but want to be a member of NSDAA.



Nebraska School for the Deaf Alumni Association

Membership Form

By becoming a member, you will receive emails- newsletters, meeting minutes, the death of our NSD Alumni/faculty/staff, flyer for upcoming events, opportunity to participate in committee and voting rights for alumni at the future NSDAA Conference/Reunion.

Form Per Person (need to print more forms, go to www.nsdAA1901.org)

Selective Lists	Price	Select
NSDAA Member for 2019-2024	\$20.00	
Donation	\$	
TOTAL:		

Please Print Clearly

Full Name:
Class of _____ or Associate (Staff, Friend, and Family):
Address:
City, State and Zip Code:
Email Address:

Please mail the Membership Applicant Form along with the payment to the NSDAA and write "Membership 2019-2024" or "Donation" in the memo field.

Mail to:
Rita Johnson
1586 County Road A
Ceresco, NE 68017

ALL INFORMATION WILL BE KEPT IN CONFIDENTIAL.

Nebraska School for the Deaf Alumni Association, Inc. is a 501(c)(3) non-profit organization and your contribution is tax deductible.