New England League of Middle Schools

Membership 2016–2017

NELMS, through it's vision, leadership, and programs provides a network of services for learning about and implementing developmentally appropriate practices for young adolescents that will serve them in their ever changing world.

Why join NELMS? What is available?

- School based professional development and consultation services designed to meet the needs and objectives of the school
- School Improvement and School Reform strategies
- Team, Instructional, and Leadership coaching
- Content support
- Advisory, teaming, scheduling, and young adolescent solutions
- School and/or Program Assessment
- Special member rate for Professional Development Activities, Annual Conference, Professional Summits, Summer Institute and more
- Continuing Education and College Credit opportunities
- Scholar Leader Dinner
- Spotlight School Award and Recognition Programs
- Discount books from the resource library
- Networking and Colleagueship
- Middle Level Advocacy
- School memberships receive a $100 voucher to go towards professional development activity
- Individual/retiree members receive a $25 voucher to go towards professional development activity
- Student leadership/voice opportunities

We are here for you and the young adolescents you serve!

Membership application

Name: _____ Title: _____
(name will be listed in membership directory)

School: _____

Street Address: _____

City: _____ State:_____ ZIP: _____

Telephone:_____ Fax: _____

E-mail address* required: _____ Contact Person: _____

Number of middle level professional staff: _____ Grade Configuration:_____

✲An e-mail address is required to receive NELMS member benefits.

◯ **Comprehensive Membership–$295** ◯ **Small District Membership–$295** ◯ **Small School Membership–$200**

◯ **Individual Educator Membership–$70** ◯ **Parent/Retiree/Student Membership–$35**

Please attach a **list of people** that informs NELMS of all who are related to the specific membership requested. Also please indicate next to **each person their subject area or grade level or title** as well as an **accurate e-mail address** so that all will receive member benefits.

Form of Payment

Total Due:_____

◯ MasterCard ◯ Visa ◯ Discover

Card # ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ Expiration Date: ☐☐/☐☐

Billing ZIP Code _____ Security Code (from back of card) ☐☐☐

Cardholder's Name: _____

Reset

Complete and mail or fax membership from with payment or purchase order to:
NELMS • 50 High Street, Suite 10 • North Andover, MA 01845

Submit

Tel. (978) 557-9311 • Fax (978) 557-9312 • nelms@nelms.org • www.nelms.org