

# Associate Membership Application

YES! We want to join the Small School Districts' Association.

**Membership Level:**

Bronze (\$750)       Platinum (\$5,000)       Strategic Partner (\$5,000)

Company Name: \_\_\_\_\_ Date: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

County: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Type of Company: \_\_\_\_\_

**Method of Payment:**

American Express       MasterCard       Visa

Credit Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_

Billing Address for credit card: \_\_\_\_\_

\_\_\_\_\_

*Please return this application with your payment to:*

**Small School Districts' Association**

455 Capitol Mall, Suite 315

Sacramento, CA 95814

FAX: (916) 441-4851

If you have any questions, please contact Shelly Tillery at (916) 444-9335 or toll free (866) 443-7732 or via e-mail at [shelly@ssda.org](mailto:shelly@ssda.org).