



NYCESPA Auxiliary Membership Form

NYC Elementary School Principals Association
16 Court Street, Suite 418, Brooklyn, NY 11241 718/643-9696

Name: _____

Address: _____

Telephone Number: _____

E-mail address: _____

Date of Retirement: _____ Dist: _____ School: _____

Enclosed is my check in the amount of \$25, payable to NYCESPA, for auxiliary membership for the school year, 2008-2009.

Please send me: (check one)

_____ Natter Pocket Calendar

_____ NYCESPA pen

Please return this form with your check to Pierre Lehmuller, Executive Director, at the above address.