



INSpra Membership Application

Name: _____ Date of Application _____

Title: _____

District / Organization / University / College: _____

Address: _____

City / State / ZIP: _____

Phone: _____ Fax: _____

E-mail: _____

How many years have you been in the school public relations field? _____

In which region is your school district located?

- _____ Greater Chicago – Cook County
- _____ Chicagoland: The Collar Counties of DuPage, Kane, Lake and Will
- _____ Northern Region (other counties north of I-80)
- _____ Central Region (other counties south of I-80 to I-72)
- _____ Southern Region (I-72 south to state border)

**Please state whether you are joining as a student, retiree, or an individual.
Sign up 3 people from your school district and save money!**

_____	One Membership	\$125
_____	Student / Retired Membership*	\$ 62
_____	District Membership (3 people) **	\$285

* If joining as a student member, please include a copy of a valid student ID that shows the current year.
 ** If joining as a district membership, please include information on the additional members (including their name, title, address, phone, fax and e-mail) on the reverse side of this application. Thank you!

Tips & Tactics is one of INSPRA's most popular and acclaimed programs—with good reason! Don't miss out. Sign up now for all of our Tips & Tactics sessions and save on paperwork. See the enclosed flier for details about this year's sessions.

_____ **Active Member Rate**
 YES! Please enroll me at this time for this year's Tips & Tactics series (six sessions) \$150.00

\$_____ TOTAL ENCLOSED: Method of Payment _____ Check _____ Visa/MC _____ Amex
 Credit Card #: _____ Exp Date: _____

Please make checks payable to INSPRA and remit to:
INSpra, P.O. Box 47, Frankfort, IL 60423

Or pay online at: www.inspra.org
Questions? Call the Chapter Office at (815) 464-3275

Get involved! INSPRA has several committees that carry on the chapter work through the year. Committee participation is not exclusive to Board members. If you are interested in volunteering, please circle or check below your selection(s) and return this form along with your dues. The committee chairperson will contact you. *Thank you!*

<input type="checkbox"/> Communications Contest	<input type="checkbox"/> Strategic Planning
<input type="checkbox"/> NSPra Conference	<input type="checkbox"/> Communications (website, etc.)
<input type="checkbox"/> Membership	<input type="checkbox"/> Distinguished Service Awards
<input type="checkbox"/> Programs - Tips & Tactics	
<input type="checkbox"/> Legislative	

MENTOR PROGRAM

I would like to serve as a Mentor to someone less experienced in school PR

I am less experienced in school PR and would like to be mentored