

MEMBERSHIP APPLICATION FORM



Black Alliance for Educational Options

Renewal Upgrade New Membership

1710 Rhode Island Avenue NW, FL 12
Washington, D.C. 20036
p: 202.429.2236
f: 202.429.2237

Male First Name MI Last Name

Female Address City State Zip

Ms.

Mrs. Birthdate

Mr.

Dr. Day Phone Evening Phone Mobile Phone

Fax E-mail Address

Preferred Method of Contact: Day Phone Evening Phone Mobile Phone Fax E-mail

Company Job Title

Highest Level of Education:

High School Diploma College Degree Masters Degree Doctoral Other: _____

Race/Ethnicity: _____

Please check all that apply:

My children attend:

Traditional Public School
 Charter School
 Private School
 Home School
 Other: _____

How did I hear about BAEO:

BAEO TV Ad
 TV News Program
 Radio
 Newspaper
 Magazine
 Internet
 Co-worker
 Family Member
 Friend
 Other, please specify: _____

I am a:

High School Student
 Undergraduate/Graduate Student
 Parent/Guardian of a K-12 Student
 PTOP/PTA Member
 Teacher at a _____ school
 School Administrator
 Other PK-12 Educational Staff Person
 School Board Member
 College/University Faculty or Staff
 Elected Official
 Business Professional
 Community Activist/Leader
 Religious Leader/Minister

My age:

16-35 (emerging leader)
 36-55
 56 and over

OPTION 1: LIFE MEMBERSHIP

Diamond -	<input type="checkbox"/> \$2,500	<input type="checkbox"/> (minimum of \$250/year for 10 years)
Gold -	<input type="checkbox"/> \$1,500	<input type="checkbox"/> (minimum of \$150/year for 10 years)
Silver -	<input type="checkbox"/> \$900	<input type="checkbox"/> (minimum of \$150/year for 6 years)
Bronze -	<input type="checkbox"/> \$500	<input type="checkbox"/> (minimum of \$100/year for 5 years)

OPTION 2: SINGLE YEAR MEMBERSHIP

Full-time Students -	<input type="checkbox"/> \$10	<input type="checkbox"/> \$20	<input type="checkbox"/> Other \$
Individual -	<input type="checkbox"/> \$25	<input type="checkbox"/> \$50	<input type="checkbox"/> \$100
Family -	<input type="checkbox"/> \$35	<input type="checkbox"/> \$50	<input type="checkbox"/> \$100
Retired -	<input type="checkbox"/> \$25	<input type="checkbox"/> \$50	<input type="checkbox"/> \$100

Family Members (if there is a family membership)

Household Income:

Under \$33,597 \$33,598 – \$43,937 \$43,938 – \$52,999 \$53,000 – \$65,000 Above \$65,000

Chapter (if known or applicable)

Do you know about NCLB? Yes No

Choose a payment option:

Enclose a check or money order made out to BAEO or check and complete form below.

MasterCard Visa American Express Discover

Account Number

Expiration Date

Card Holder Name

Card Holder Signature

Billing Address

City

State Zip

BAEO's policy forbids the use of our Member Lists for sales, telemarketing or other unauthorized and inappropriate use. The lists are provided to members of our organization. While the list may be used for intra-organization networking, outside event invitations and business-related mailings by members, it may not be provided for non-members.

I, the undersigned, hereby affirm to abide by the Bylaws and policies of the Black Alliance for Educational Options, Inc.

Applicant

Date