



The Council of New York Special Education Administrators
Post Office Box 36
Granite Springs, NY 10527

Membership Application

First Name: _____ Last Name: _____

Job Title: _____

Organization/District: _____

Address: _____

City: _____ State: _____ Zip: _____

E-mail: _____ Phone: _____

CHECK ONE

Unified Member: _____ **\$75.00**

This subdivision membership consists of paid members of the Council for Exceptional Children and the Council of Administrators of Special Education as well as the Council of New York Special Education Administrators unit. Only Unified Members can serve in Executive Committee positions as well as Board of Directors positions. **CEC/CASE Membership Number** _____

Member: _____ **\$75.00**

Members shall consist of paid members of Council of New York Special Education Administrators. Members and Unified Members can serve on the Board of Directors but not on the Executive Committee.

Retired Member: _____ **\$25.00**

Retiree membership is granted to individuals by the board of directors who upon retirement are members in good standing with CNYSEA. Retired members can serve on committees of the board.

Student Member: _____ **\$25.00**

Student membership is available to individuals who are enrolled full time in a college/university. Student members can serve on committees of the board. College/University: _____

Membership is from July 1 through June 30

Member of CASE Division of CEC? ___Yes ___No (CEC Membership Number: _____)
You must be a member of CASE to be a CNYSEA Unified Member.

Dues for CASE/CEC Membership need to be paid to the Council for Exceptional Children. You may join/renew your CEC/CASE Membership online at www.cec.sped.org or by calling 1-800-224-6830. Application may also be downloaded.

We look forward to an exciting new year of working collaboratively on behalf of students with disabilities.

Make Checks payable to **CNYSEA** and Mail to:
Council of New York Administrators of Special Education
PO Box 36
Granite Springs, New York 10527