

SOUTH DAKOTA ASSOCIATION OF EDUCATIONAL OFFICE PROFESSIONALS
Membership Application July 1, 2018 - June 30, 2019

<input type="checkbox"/> New Membership \$25.00	<input type="checkbox"/> Renewal Membership \$25.00	<input type="checkbox"/> Associate Membership \$25.00
<input type="checkbox"/> Life Membership \$375.00	<input type="checkbox"/> Retired Membership \$15.00	

Name _____ Phone (Home) _____ (Work) _____

E-Mail _____ FAX _____

Address _____
Street City State Zip

Elementary Middle School Secondary Administration Higher Education
 State Department Other Birthday _____

School District _____ County _____ SDAEOP Area _____

No. of Years in SDAEOP _____ (including this year) No. of years in NAEOP _____ (including this year)

Personal interests and hobbies _____

Are you now or do you plan to continue your education? _____ (College, PSP, etc)

If you have served on the SDAEOP Board of Directors, please list the office(s) and committee(s) you have served on and the year served:

If you have not had the opportunity to serve on the SDAEOP Board of Directors, would you be interested in doing so and in what capacity?

Comments regarding our Association: _____

Please make checks payable to SDAEOP and mail (along with this form) to:

SDAEOP Membership
Peggy Greiner
15065 471st Ave
Twin Brooks, SD 57269
peggy.greiner@k12.sd.us

