

# NCEE

## NATIONAL COALITION FOR ELECTRONICS EDUCATION

### MEMBERSHIP APPLICATION FORM – 2005

Name of Organization: \_\_\_\_\_

Assigned representative to NCEE \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

E-mail address: \_\_\_\_\_ (Company representative to NCEE)

Web address: \_\_\_\_\_

Annual dues amount: \$350.00/ 12 months  
Three Hundred Fifty Dollars.

Please make out company check to: **NCEE**

**Mail to:**  
**NCEE Treasurer, Steve Gelman**  
**c/o PSA**  
**71 Columbia St**  
**Cohoes, NY 12047**  
**Ph: (518 237 7777)**



Statement: Our Company wishes to become a member of and support  
the goals of NCEE.

**Company Representative Signature: X** \_\_\_\_\_ **Date** \_\_\_\_\_