



**Northeastern Pennsylvania Council
of Teachers of Mathematics**

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- Reg. 1 Yr. \$5.00
- Reg. 3 Yrs. \$12.00
- Student \$2.00
- New
- Renew

Membership Application

Mrs. Ms Mr I Other _____

Name _____

School District _____ County (in which you teach) _____

School _____

City _____ State _____ Zip _____

E-mail Address _____

Home Address _____

City _____ State _____ Zip _____

Phones: School (____) _____ Home (____) _____

Preferred Mailing Address Home School

Teaching Level:

- Elementary
- Middle/Intermediate
- Secondary
- Post Secondary
- Administration
- Retired
- Other _____

Please indicate if you are currently a member of :

PCTM (Pennsylvania council of Teachers of Mathematics)

NCTM (National Council of Teachers of Mathematics)

Please forward this application with your dues to Theresa Philbin Membership Chair, or give to an executive board member. Make check payable to **NPCTM**.

Theresa Philbin
607 S. Irving Avenue
Scranton, PA 18505

DB _____	
GS _____	