

Please mail the completed form to our Membership Chair:  
Bernard Bigley  
Manasquan School District  
169 Broad Street  
Manasquan, NJ 08736

## ***NJSBGA MAILING LIST***

**Name**

**Title**

**Company/District**

**Address**

**Work Phone**

**Fax**

**E-Mail**

**Web Site**

**Home Phone**

**Cell**

### **MEMBER STATUS**

**Chapter**

**Date** (became a new member)

**Dues Paid As Of**

**PO or Check #**

**State Invoice #**

☐

**Member**

☐

**Retired Member**

☐

**Associate Member**

☐

**Business Administrator**

☐

**Non Member Person**

☐

**Non Member Company**

☐

**Non Member School District**

☐

**Other**

**CEFM**

☐

**Yes**

☐

**No**