



North Carolina  
Association of  
Extension Program  
Assistants, Associates,  
& Technicians

## 2010 Membership Application Form

Name: \_\_\_\_\_

Title: \_\_\_\_\_

County: \_\_\_\_\_ District: \_\_\_\_\_

Date of Hire: (for new members) \_\_\_\_\_ Program Area:  4-H and Youth Development

I'm a retiring P.A. seeking lifetime membership.

- Family & Consumer Education  
 FCS – Nutrition (EFNEP, etc)  
 Agriculture & Natural Resources  
 Other \_\_\_\_\_

### WORK ADDRESS

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Fax #: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

### HOME ADDRESS (optional)

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Fax #: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

### COMMITTEE ASSIGNMENT:

I would like to volunteer to serve on the following committee:

- Conference     Finance     Membership     Constitution & Bylaws     Awards

**Membership is due annually by March 1, and covers the calendar year.** Newly hired personnel should apply for membership within 120 days of hire. Membership must be paid on time to be eligible for awards and/or officer roles. Membership questions should be directed to Becky Miller, NCAEPAAT Vice President, at [becky\\_miller@ncsu.edu](mailto:becky_miller@ncsu.edu) or (252) 448-9621.

COST OF MEMBERSHIP is \$25.00 each year. MAIL Completed Form and \$25.00 check payable to NCAEPAAT to:

NCAEPAAT  
c/o [Rell Killebrew](#), Treasurer  
Edgecombe County Cooperative Extension  
201 Saint Andrew Street  
Tarboro, NC 27886

Log in to our website at <http://www.ces.ncsu.edu/assn.ncaepaat> for updates and annual conference information.

For internal use only: \_\_\_\_\_ Date Rec'd \_\_\_\_\_ Check # \_\_\_\_\_ Check date