



# MEMBERSHIP APPLICATION

## MEMBERSHIP DETAILS

NAPT Individual membership is designed for professionals in the student transportation industry. This membership type is for one person in your organization and the fee is \$115 for the year. Your membership year is based on your anniversary (join) date.

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_ Suffix: \_\_\_\_\_

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

District/Company: \_\_\_\_\_

This is my (please check)  Work Address  Home Address

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

City: \_\_\_\_\_ State /Province: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

*Your email address is required to process and finalize your membership.*

NAPT membership cards are available upon request. Would you like to receive an NAPT membership card in the mail?  Yes, please  No, thank you  
*Your membership card will be mailed to the address above once payment is received.*

Do you agree to receive email from NAPT and its members?  Yes  No

Do you agree to receive pertinent information, related to the issues covered by NAPT, from interested third-party entities?  Yes  No

As an active individual member of NAPT, you will be listed in our Online Member Directory.

Please choose the following category that best describes the organization you currently work for:

Head Start  Industry Consultant  Private Contractor  Private School  Public School  Other: \_\_\_\_\_

## PLEASE SELECT PAYMENT METHOD

Check or Money Order Payable to NAPT in US Dollars  Please Send Invoice (attach purchase order, if available)

In an effort to enhance the security of your credit and financial information, NAPT no longer accepts credit card information via email or fax. Please complete and submit this form to NAPT headquarters. Once we receive your application, an invoice will be emailed to you with payment instructions. You can then log in at [www.napt.org](http://www.napt.org) and complete payment online with your credit card. If you have any questions or would like assistance, please call headquarters at 800.989.6278. *Thank you!*

**Your receipt will be sent to the email address listed above once your membership is processed.**

**SUBMIT YOUR FORM VIA FAX: 518.218.0867 OR EMAIL: [BRIANNE.PECK@NAPT.ORG](mailto:BRIANNE.PECK@NAPT.ORG)**

**1840 WESTERN AVENUE, ALBANY, NY 12203**



*Please note, NAPT membership remains with the purchasing individual or organization and is otherwise nontransferable.*