



**NEW YORK CITY ELEMENTARY SCHOOL
PRINCIPALS ASSOCIATION**

**40 Rector St FL 12
New York NY 10006-1705
646-660-4883**

IT'S TIME TO RENEW FOR 2019-2020

APPLICATION FOR AUXILIARY MEMBERSHIP

NAME: _____

Mailing Address: _____

City, State _____ **ZIP:** _____ **+4** _____

Telephone: _____

Email Address: _____

Date of Retirement: ____ / ____ / ____ **Dist:** ____ **School:** _____

Enclosed is my check in the amount of \$25.00, payable to NYCESPA for auxiliary membership for the 2019-20 school year. Please send me: (Check one)

_____ Natter Pocket Calendar

_____ NYCESPA Pen & Pencil Set

_____ NYCESPA Texting Gloves (Gray w/a blue NYCESPA logo)

N.B. The NYCESPA Newsletter is now sent electronically. A current email is essential.

(Mail this form to NYCESPA, Attn: Pierre Lehmuller, 40 Rector St. Fl 12 New York NY 10006-1705)