Southeastern New England Marine Educators (SENEEME) MEMBERSHIP APPLICATION
☐ New  ☐ Renewal (check one)

Name: __________________________________________________________________________
☐ my information has not changed

Today's Date: ____________________________________________________________________

School/Business Address: ____________________________________________________________
Street
________________________________________________________
City, State, Zip Code

Home Address: ____________________________________________________________________
Street
________________________________________________________
City, State, Zip Code

Work Phone: ______________________________________________________________________

Home Phone: ______________________________________________________________________

Work E-mail Address: __________________________________________________________________

Home E-mail Address: __________________________________________________________________

Position (check all that apply)
☐ Teacher  ☐ Retired  ☐ Scientist  ☐ Consultan
☐ Principal  ☐ Professor  ☐ Dept. Head/Chair  ☐ Other________
☐ Student  ☐ Supervisor/Coordinator  ☐ Administrator

Disciplines (check all that apply)
☐ Biology  ☐ Environmental  ☐ Computer Science  ☐ Other________
☐ Physics  ☐ Science  ☐ General Science
☐ Chemistry  ☐ Physical Science  ☐ Tech Education

Which grades do you teach? (check all that apply)
☐ K – 5th Grade  ☐ 6th – 8th Grade  ☐ 9th – 12th Grade  ☐ College

Send SENEEME e-mailings to (check one):
☐ Home E-mail Address  ☐ Work E-mail Address

Please consider joining one or more of our committees:
☐ Membership & Public Relations  ☐ Nominating  ☐ Development
☐ Conference/Special Events  ☐ Scholarships & Awards

Membership Category (check one):
☐ Active Member (1 Year $15)
☐ Active Member (2 Years $25)
☐ Active Member (3 Years $35)
☐ Organizational Memberships (Non—Profits Only $100)
☐ Corporate Membership (1 Year $250)

Please note: Regardless of which membership option you choose, your membership will begin immediately and continue until December 31st of the following year (or appropriate future year for 2- or 3-year memberships).

Total Enclosed: $________

Please return this form with check payable to SENEEME.

Mail to SENEEME
c/o Julie P. Ainsworth
31 Green Springs Dr.
Madison, CT 06443