

## MEMBERSHIP APPLICATION

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

Circle One: Mr. Mrs. Ms. Dr.

Current Position: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

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

School/Organization: \_\_\_\_\_

E-mail addresses:

(work) \_\_\_\_\_

(personal) \_\_\_\_\_

**Membership Fee** (Payable to SCABSE)

\_\_\_\_\_ Active (full-time educators) \$40

\_\_\_\_\_ Affiliate (supporter of education - individual or organization) \$40

\_\_\_\_\_ Retired (retired from educational service) \$25

Student (high school/full time college-cannot be employed in a district) \$15

Referred by: \_\_\_\_\_

Membership is valid from January 1 until December 31

Mail to: SCABSE

PO Box 11737

Columbia, SC 29211

## BOARD MEMBERS & ADMINISTRATIVE STAFF

President

Janette Williams  
williams.janette61@ gmail.com

President Elect

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**Bylaws**

**Dr. Teresa Pope**  
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Teresalpope@sbcprep.org

### COMMITTEE CHAIRS

Membership

Elizabeth Burgess  
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Educational Issues

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## SOUTH CAROLINA ALLIANCE OF BLACK SCHOOL EDUCATORS



An Affiliate of the  
National Alliance  
Of  
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