

NACDA Membership Application



- **FOOTBALL BOWL SUBDIVISION (formerly Division I-A)**
 - Group Membership for 15 people (\$1750.00) - Once the 15 spots are filled, each additional membership is \$375.00 per person
- **FOOTBALL CHAMPIONSHIP SUBDIVISION (formerly Division I-AA), DIVISION I (formerly Division I-AAA)**
 - Individual Membership (\$375.00) or
 - Group Membership for 15 people (\$975.00) - Once the 15 spots are filled, each additional membership is \$375.00 per person
- **DIVISION II**
 - Individual Membership (\$195.00) or
 - Group Membership for 15 people (\$675.00) - Once the 15 spots are filled, each additional membership is \$195.00 per person
- **DIVISION III, NAIA and CANADIAN**
 - Individual Membership (\$175.00) or
 - Group Membership for 15 people (\$375.00) - Once the 15 spots are filled, each additional membership is \$175.00 per person
- **JUNIOR/COMMUNITY COLLEGES**
 - Individual Membership (\$125.00) or
 - Group Membership for 15 people (\$275.00) - Once the 15 spots are filled, each additional membership is \$175.00 per person

Primary Contact: _____ NCAA: _____ NAIA: _____
 Title: _____ Div. I _____ NJCAA: _____
 Institution: _____ Div. II _____ Other: _____
 Mailing Address: _____ Div. III _____
 City: _____ State: _____ Zip: _____
 Office Phone: _____ Office Fax: _____
 E-mail Address: _____

Payment Information

I am paying by check _____ credit card _____
 (Checks payable to NACDA)
 _____ Discover Card _____ MasterCard _____ Visa
 _____ AMEX (only credit cards accepted)
 Card Number _____
 Exp. Date _____
 Name on Card _____
 Authorized Signature _____

Fed ID No. 41-0906322

Please return application and dues to:

NACDA Membership
 24651 Detroit Rd ● Westlake, Ohio 44145
 440/892-4000 ● 440/892-4007 (Fax)
 Contact: Brian Horning ● bhorning@nacda.com
 Web Site: www.nacda.com

NATIONAL ASSOCIATION OF COLLEGIATE DIRECTORS OF ATHLETICS

2007-2008 GROUP MEMBERSHIP

Group Membership in NACDA includes fourteen individual memberships (either male or female) in addition to the Director of Athletics. Each of the fifteen members will receive our magazine, **Athletics Administration**. Please feel free to list your President, Faculty Rep. and any others you wish to be members and/or receive **Athletics Administration** (such as your University library).

Institution: _____

Mailing Address _____

City, State, Zip: _____

Phone: _____ **Fax:** _____

Department Secretary _____ **Phone:** _____

Please list the names and titles of your fifteen 2007/2008 members below and provide the mailing address, phone number, and/or fax number for any member whose information differs from that listed above.

(1) _____
(Name & Title)

(Mailing Address)

(Phone) _____ (Fax)

(E-mail)

(2) _____
(Name & Title)

(Mailing Address)

(Phone) _____ (Fax)

(E-mail)

(3) _____
(Name & Title)

(Mailing Address)

(Phone) _____ (Fax)

(E-mail)

(4) _____
(Name & Title)

(Mailing Address)

(Phone) _____ (Fax)

(E-mail)

(5) _____
(Name & Title)

(Mailing Address)

(Phone) _____ (Fax)

(E-mail)

(6) _____
(Name & Title)

(Mailing Address)

(Phone) _____ (Fax)

(E-mail)

(7) _____
(Name & Title)

(Mailing Address)

(Phone) _____ (Fax)

(E-mail)

(8) _____
(Name & Title)

(Mailing Address)

(Phone) _____ (Fax)

(E-mail)

INSTITUTION _____

(9) _____
(Name & Title)

(Mailing Address)

(Phone) (Fax)

(E-mail)

(10) _____
(Name & Title)

(Mailing Address)

(Phone) (Fax)

(E-mail)

(11) _____
(Name & Title)

(Mailing Address)

(Phone) (Fax)

(E-mail)

(12) _____
(Name & Title)

(Mailing Address)

(Phone) (Fax)

(E-mail)

(13) _____
(Name & Title)

(Mailing Address)

(Phone) (Fax)

(E-mail)

(14) _____
(Name & Title)

(Mailing Address)

(Phone) (Fax)

(E-mail)

(15) _____
(Name & Title)

(Mailing Address)

(Phone) (Fax)

(E-mail)

Please return form and 1 copy of invoice to:

**NACDA Membership
24651 Detroit Road
Westlake, OH 44145**