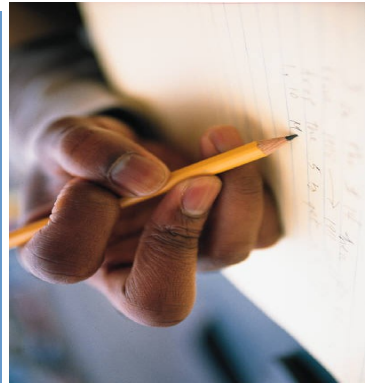


NMACTE MEMBERSHIP INFORMATION REQUEST FORM

Thank You for your Input!

Thanks for letting us know how we can better serve you! We value your input and look forward to keeping you informed and providing you up-to-date information. Please continue to allow us to serve your needs!



Your Contact Information!

Name: _____
Address: _____
City: _____
Phone: _____
E-Mail: _____
ACTE Membership #: _____

Are you receiving the National ACTE Techniques Magazine?
 Yes
 No

Are you receiving the monthly e-mail updates from the National ACTE Office?
 Yes
 No

As we work through the process of having socials with guest speakers, can we provide any additional information and/or research a topic of interest for you?
 Yes
 No

Comments?: _____

I would like to see the following topics at the NMACTE State Conference (September): _____

Let us know how we can better serve your needs as an ACTE Member:



Please return this form to:

New Mexico Association of Career & Technical Education
c/o: Carol McAlister, Executive Director
Post Office Box 866
Carlsbad, NM 88220

____ of _____
E-mail your comments to: carol.mcalister@carlsbadschools.net