

Questions?
Call Sue Everett at
201-653-5480 or check our
Web site at www.gsspa.org

http://www.gsspa.org

Membership Form

Welcome to GSSPA. Because you are a member, your students are eligible for the NJ High School Journalist of the Year/ Bernard Kilgore Scholarship and the Bob Stevens Memorial Scholarship, and your publication may enter our summer critique / contest.

Please photocopy this and send address information for each adviser separately.

				Date.	
Contact Information - Plea	se Print Clearly				
Adviser's Name:	•			CJE 🗌	MJE 🗌
School:					
Street:					
City:	County:		State:	Zip:	
School Phone:	School E-mail:				
Name of Publication:					
Type of Publication: (Check one) Newspaper	Yearbo	ok		
Home Address:					
City:			State:	Zip:	
Cell / Home Phone:	Home E-mail:				
JEA Member	ship	New I	Renew		(circle one
	tact / publications Mail to:	School	Hon	ne	circle one
For JEA Dire	ctory List:	School	Hon	ne	(circle one
Would you l	ike to join the JEA listserv?	Yes 1	No Alr	eady on	(circle one
Preferred e-	mail for listserve	School	Hon	ne	(circle one
Payment Information					
One year GSSPA membership @ 1	\$30.00				
One year JEA Membership @ \$65					
Total Fees Enclosed: \$					
Method of Payment: (Check one		ol Purchase	order #		