**Delaware Association of Athletic Directors**

**(DAAD)**

Send application to:

Michael Wagner

DAAD Executive Director

80 Greenview Drive

Dover, DE 19901

**Membership Application and Renewal**

**Please print or type; make sure you include home, school address and your e-mail address.** Complete all information for each individual and send in all completed forms attached to one check.

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

School Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City/St: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_

AD’s School Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City/St: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_

Home/Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Number of Years as an AD: \_\_\_\_\_

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**DAAD Dues *Number of years as an Athletic Administrator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (include 2016-2017)***

**\_\_\_\_\_\_\_\_$150.00 High School (If you are both the high school and middle school AD the fee is still $150.00)**

**\_\_\_\_\_\_\_\_ $50.00 Middle School AD only or Assistant AD**

For all active athletic directors, assistant athletic directors, and other athletic administrators in public and private schools, and state agencies.

NIAAA Dues

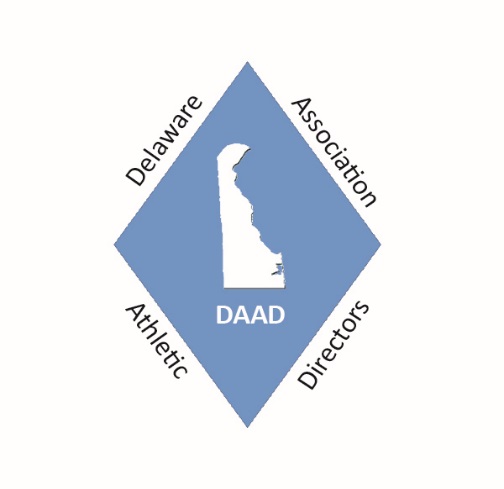
**\_\_\_\_\_\_\_\_$80.00 NIAAA (National Interscholastic Athletic Administrators Association**

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**Total Amount Enclosed: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Make checks payable to ***DAAD*** (Sorry – No Credit Cards)

**(DE Vendor ID # - 0000034342)**

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