

New Jersey Interdistrict Public School Choice Association



NJIPSCA Membership Registration/Renewal Form

Note: Dues are based on Choice Aid
(<http://www.state.nj.us/education/stateaid/1819/district.pdf>)
Please calculate 1% of your anticipated choice aid. Minimum
payment is \$100. Maximum payment is \$1,000.

Make Checks Payable to: **NJIPSCA**
NJIPSCA Tax ID# 46-0952867
Please print out this form and
mail form with payment voucher and/or check to:

NJIPSCA
61 Haddon Avenue #290
Westmont NJ 08108

Please complete the information below:

School District Name: _____

Choice Contact Person (and Title): _____

Choice Contact Person's Phone Number _____

Choice Contact Person's Email Address: _____

Name of Superintendent: _____

Superintendent's Phone Number: _____

District Website Address: _____

District Phone Number: _____