



# *College/University Membership 2026-2027*

We are leaders in promoting middle level best practices by providing collaborative learning experiences that support students' academic, social, and emotional growth and success.

## ***Your NELMS Membership will provide you with the following benefits:***

- ❖ Complimentary registration to our 46<sup>th</sup> Annual Conference for your undergraduate students (Additional fee for lunch)
- ❖ Complimentary registration for two faculty members to our 46<sup>th</sup> Annual Conference (Additional fee for lunch)
- ❖ Opportunity for any faculty or undergraduate students to attend any NELMS professional development workshop/conference at the member price.
- ❖ Opportunity for your students to visit any of our Spotlight Schools.
- ❖ Complimentary visit by a NELMS staff member to an education department class to discuss any "to be determined" middle level topic.
- ❖ Complimentary individual NELMS membership for the 2027-2028 school year to your Education Major Graduates upon graduation this spring. (They simply need to apply.)
- ❖ Publicity in our Midlines newsletter as a supporter.

**College/University Membership Rate - \$449**  
**Membership Period: July 1 to June 30.**



# Membership Application 2026-2027

## College/University Membership Rate- \$449 Membership starts on July 1st and ends on June 30th.

College/University Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Contact: \_\_\_\_\_ E-mail address\* required: \_\_\_\_\_

Alternate Contact: \_\_\_\_\_ E-mail address\* required: \_\_\_\_\_

Number of education majors: \_\_\_\_\_ \*An e-mail address is required to receive NELMS member benefits.

### Form of Payment:

- Check (payable to New England League of Middle Schools)
- Purchase Order # \_\_\_\_\_ (Must be attached to this form)
- Credit Card (We accept MasterCard, Visa, and Discover.)

Card #: \_\_\_\_\_ Expiration Date (MMYY): \_\_\_\_\_

Security Code (from back of card): \_\_\_\_\_ Billing Telephone Number: \_\_\_\_\_

Billing Street Address: \_\_\_\_\_

Billing City, State and Zip Code: \_\_\_\_\_

Print Cardholder's Name: \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_

Completed form (with payment or signed purchase order) can be mailed, or e-mailed to:  
**New England League of Middle Schools • PO Box 887 • Georgetown, MA 01833**  
☎ (877) 402-7627 • E-Mail: [nelms@nelms.org](mailto:nelms@nelms.org)