

**Nassau Association of District Curriculum Officials  
2015-2016 NADCO Membership Form**

**School District**

**Voting delegate:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_

**Business Phone:** \_\_\_\_\_ **Fax Number:** \_\_\_\_\_

**e-mail Address:** \_\_\_\_\_ **Home Phone:** \_\_\_\_\_

**Other representatives:**

**A.**  
**Name** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Business Phone:** \_\_\_\_\_ **Fax Number:** \_\_\_\_\_

**e-mail Address:** \_\_\_\_\_ **Home Phone:** \_\_\_\_\_

**B.**  
**Name** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Business Phone:** \_\_\_\_\_ **Fax Number:** \_\_\_\_\_

**e-mail Address:** \_\_\_\_\_ **Home Phone:** \_\_\_\_\_

Please return this form with a check or purchase order for \$80.00 per Representative (\$35 for retirees), payable to **NADCO**, to:

**Christopher Pellettieri**  
**NADCO Treasurer**  
**Rockville Centre Schools**  
**Administrative Offices**  
**128 Shepherd Street**  
**Rockville Centre, NY 11570 -2298**