

2020 MEMBERSHIP APPLICATION



3100 Clarendon Boulevard, Suite 600, Arlington, VA 22201
 Phone: 888.232.7733 • Fax: 703.264.9494
 Email: service@exceptionalchildren.org • exceptionalchildren.org

Your Member Information

Member ID: <i>(if known)</i>	Membership in CEC automatically includes membership in your state or provincial CEC Unit, where one is available.	Prefix: <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr.
First Name:	Last Name:	Suffix: <input type="checkbox"/> Jr. <input type="checkbox"/> Sr.
Job Title <i>(required)</i> :	Degree Attained: <input type="checkbox"/> BA <input type="checkbox"/> MA <input type="checkbox"/> EdD <input type="checkbox"/> PhD	
School/University/Current Employer <i>(required)</i> :		
Preferred Mailing Address:		<input type="checkbox"/> Work <input type="checkbox"/> Home
Apt./Suite/P.O.Box Number:	City:	
State/Province:	Zip/Postal Code:	Country: <i>(outside USA & Canada, please email service@exceptionalchildren.org)</i>
Phone:	Email Address <i>(required)</i> :	

I do not wish to receive email communications to stay current on CEC news, legislative updates, events and services.

Your Membership Options

Member Type	Professional	Early Career Professional	Student*
Premier	<input type="checkbox"/> \$210	<input type="checkbox"/> \$185	<input type="checkbox"/> \$135
Full	<input type="checkbox"/> \$130	<input type="checkbox"/> \$110	<input type="checkbox"/> \$80
Basic	<input type="checkbox"/> \$75	<input type="checkbox"/> \$60	<input type="checkbox"/> \$40

*For current undergraduate or graduate students who have not yet started their education career.

University Name: _____ Expected Graduation Date: _____ Degree: BA MA

Add One or More Special Interest Divisions to Your Membership

Division Name	Professional Member	Early Career Professional Member	Student Member
Council of Administrators of Special Education CASE	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	<input type="checkbox"/> \$30
Council for Children with Behavioral Disorders CCBBD	<input type="checkbox"/> \$35	<input type="checkbox"/> \$35	<input type="checkbox"/> \$25
Division for Research CEC-DR	<input type="checkbox"/> \$35	<input type="checkbox"/> \$35	<input type="checkbox"/> \$19
CEC Pioneers Division CEC-PD	<input type="checkbox"/> \$20	<input type="checkbox"/> n/a	<input type="checkbox"/> n/a
Council for Educational Diagnostic Services CEDS	<input type="checkbox"/> \$30	<input type="checkbox"/> \$30	<input type="checkbox"/> \$15
Division on Autism and Developmental Disabilities DADD	<input type="checkbox"/> \$30	<input type="checkbox"/> \$20	<input type="checkbox"/> \$15
Division for Communication, Language, and Deaf/Hard of Hearing DCD	<input type="checkbox"/> \$30	<input type="checkbox"/> \$20	<input type="checkbox"/> \$15
Division on Career Development and Transition DCDT	<input type="checkbox"/> \$35	<input type="checkbox"/> \$35	<input type="checkbox"/> \$20
Division for Culturally and Linguistically Diverse Exceptional Learners DDEL	<input type="checkbox"/> \$30	<input type="checkbox"/> \$30	<input type="checkbox"/> \$10
Division for Early Childhood DEC	<input type="checkbox"/> \$50	<input type="checkbox"/> \$30	<input type="checkbox"/> \$20
Division of International Special Education and Services DISES	<input type="checkbox"/> \$29	<input type="checkbox"/> \$24	<input type="checkbox"/> \$15
Division for Learning Disabilities DLD	<input type="checkbox"/> \$35	<input type="checkbox"/> \$35	<input type="checkbox"/> \$15
Division for Visual and Performing Arts Education DARTS	<input type="checkbox"/> \$20	<input type="checkbox"/> \$10	<input type="checkbox"/> \$10
Complex and Chronic Conditions: The Division for Physical, Health and Multiple Disabilities CCC	<input type="checkbox"/> \$25	<input type="checkbox"/> \$25	<input type="checkbox"/> \$15
Division on Visual Impairments and Deafblindness DVIDB	<input type="checkbox"/> \$25	<input type="checkbox"/> \$15	<input type="checkbox"/> \$5
The Association for the Gifted TAG	<input type="checkbox"/> \$30	<input type="checkbox"/> \$30	<input type="checkbox"/> \$12
Innovations in Special Education Technology Division ISET	<input type="checkbox"/> \$30	<input type="checkbox"/> \$24	<input type="checkbox"/> \$20
Teacher Education Division TED	<input type="checkbox"/> \$40	<input type="checkbox"/> \$40	<input type="checkbox"/> \$15

Total Special Interest Division Dues \$ _____

Payment Information

Payment Summary

CEC dues from previous page \$ _____
 Special Interest Division dues from above \$ _____
Total \$ _____

Please return form and full payment to: CEC, PO Box 79026, Baltimore, MD 21279-0026 | FAX: 703.264.9494 | service@exceptionalchildren.org

Method of Payment

Credit Card (in U.S. Funds) VISA Mastercard Discover American Express Discount Code: _____
 Card# _____ Expiration Date _____ Security Code _____
 Billing Address _____
 Name on Card _____ Signature _____ (required)
 Check # (in U.S. Funds) _____ Purchase Order # _____
 (Payable to the Council for Exceptional Children) (Copy of Purchase Order must be attached)

Membership in CEC is individual-based and is non-transferable and non-refundable.

Welcome to CEC!