

Questions?
Call Sue Everett at
201-653-5480 or check our
Web site at www.gsspa.org

http://www.gsspa.org

Membership Form

Welcome to GSSPA. Because you are a member, your students are eligible for the NJ High School Journalist of the Year/ Bernard Kilgore Scholarship and the Bob Stevens Memorial Scholarship, and your publication may enter our summer critique / contest.

Please photocopy this and send address information for each adviser separately.

			Date			
Contact Inform	nation - Please Print Cl	early				
Adviser's Name:				C	JE 🗌	MJE 🗌
School:						
Street:						
City:		County:		State:	Zip:	
School Phone:		School E-mail:				
Name of Publicat	cion:					
Type of Publicati	on: (Check one)	Newspaper	Yearboo	k		
Home Address:						
City:				State:	Zip:	
Cell / Home Phor	ne:	Home E-mail:				
	JEA Membership		New Re	enew		(circle one
	For JEA contact / public	ations Mail to:	School	Home		(circle one
	For JEA Directory	List:	School	Home		(circle one
	Would you like to join the Preferred e-mail for lists		Yes No School	o Alrea Home	dy on	(circle one
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Payment Infor	rmation					
One year GSSPA r	membership @ \$35.00					
One year JEA Me	mbership @ \$95.00					
Total Fees Enc	:losed: \$					
Method of Payme						
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