

Minnesota Community Education Association



2021
Membership Application
mn-mcea.org

MCEA Membership

MCEA memberships are offered to school districts based on their size. A single fee will entitle the district to a certain number of full individual memberships. It is our belief that allocating a fair number of individual memberships through a district wide plan will bring more individuals into MCEA . This should make it easier to identify members of specialized fields within Community Education and it will also encourage greater participation among smaller districts.

Membership Benefits and Services:

MCEA

District Memberships: (Voting Member)

Lobbyist/Legislative Committee Works in Support of
Children, Youth and Families
Professional Development Programs and Opportunities
MCEA Executive Office Support
Right to Vote
Right to Hold Office
Membership Directory
Annual Conference and Workshop Discounts
Member Mailing Labels - \$45
Listserve Postings of Job Vacancies (\$45 fee)
Awards

Non-District Memberships: (Non-Voting Member)

Community Education not affiliated with School District.
Citizen Membership (Students)
Business Partner Membership - 1 Free Set of Labels
Other Education Institutions
Lifetime Membership (Retired only)

Non-district memberships receive the same benefits as the district membership category except for the right to vote.

MnSACA

We no longer offer joint MnSACA memberships through MCEA. Please contact MnSACA/MnAEYC directly to become members of their association – info@mnaeyc-mnsaca.org.

Literacy Action Network

We no longer offer joint LAN memberships through MCEA. Please contact LAN directly to become members of their association – info@literactionnetwork.org.

Membership Application

Minnesota Community Education Association

Membership Year: January 1 - December 31, 2021

Section I – District Information

District Name: _____ ISD Number: _____ MCEA Region #: _____
 District Population (used in levy calculations): _____ # of Community Education Staff: _____ Full-time
 _____ Part-time

Section II – Director/Administrator Information

First Name: _____ Last Name: _____ Title: _____
 Mailing Address: _____ City: _____ State _____ Zip _____
 Phone: Work (____) _____ Home: (____) _____ Fax #(____) _____
 E-Mail _____

Section III - Membership Fees

A. District Membership:

Your TOTAL District Population	The number of memberships you receive	Membership Dues	
0 - 1,999	2	\$0	\$ _____
2,000-4,999	3	\$145	\$ _____
5,000-14,999	5	\$644	\$ _____
15,000-29,999	7	\$920	\$ _____
30,000-49,999	10	\$1,370	\$ _____
50,000-99,999	13	\$1,751	\$ _____
100,000+	17	\$2,267	\$ _____
Additional district staff members @ \$185/unlimited*		\$185	\$ _____
Advisory Council		\$100	\$ _____
		Total District Membership \$	_____

B. Non-District Membership Options:

Community Educator <u>not</u> affiliated with a school district -\$94	\$95	\$ _____
Citizen Membership (Students) -\$50	\$50	\$ _____
Other Educational Institutions (Colleges, Universities, etc.)- \$193	\$195	\$ _____
Business Partner- \$450	\$450	\$ _____
Alumni Membership (one time fee – for retired CE folks) - \$75	\$75	\$ _____
		Total Non-District Membership \$

Special Instructions:

* An unlimited number of additional memberships, beyond the category maximum, for persons affiliated with a school district, may be added for a \$185 TOTAL additional fee. These memberships are non-voting memberships and will only receive information via email, but will get all discounts & member benefits.

** We are no longer offering joint MnSACA or LAN membership. Please contact those associations directly to inquire about memberships with them.

If you need additional help, please call Jean Johnson at 651-257-0752 or email jjohnson@isd2144.org.

Return this form with your check or purchase order to:

MCEA Executive Office
 29330 Olinda Trail
 Lindstrom, MN 55045
 (651)257-0752 *FAX (651)213-2094
www.mn-mcea.org

Log on to the MCEA Website (membership) to pay with a credit card!

SECTION V (Member Forms – copy as needed)

First Name: _____ Last Name: _____ Title: _____

Mailing Address: _____ City: _____ State _____ Zip _____

Phone: Work (____) _____ Home (____) _____ Fax # (____) _____

E-Mail _____

First Name: _____ Last Name: _____ Title: _____

Mailing Address: _____ City: _____ State _____ Zip _____

Phone: Work (____) _____ Home (____) _____ Fax # (____) _____

E-Mail _____

First Name: _____ Last Name: _____ Title: _____

Mailing Address: _____ City: _____ State _____ Zip _____

Phone: Work (____) _____ Home (____) _____ Fax # (____) _____

E-Mail _____

First Name: _____ Last Name: _____ Title: _____

Mailing Address: _____ City: _____ State _____ Zip _____

Phone: Work (____) _____ Home (____) _____ Fax # (____) _____

E-Mail _____