



Northwest Association of Special Programs

Invoice Project Membership January 1, 2011 – December 31, 2011

Project _____

Institution _____

Project Contact Information

Director _____

E-mail _____

Address _____

City _____ State _____ Zip _____

Telephone _____ Fax _____

Membership:

Category	Amount	Payment Amount
<input type="checkbox"/> Project Membership	\$325	_____

Make Checks Payable to: NASP

Mail Checks to:

Northwest Association of Special Programs
c/o Lois Rasmussen
TRIO Pre-College Projects
University of Idaho
PO Box 443086
Moscow ID 83844-3086