

NATIONAL CONFERENCE OF APPELLATE COURT CLERKS

Secretariat: National Center for State Courts, 300 Newport Avenue, Williamsburg, VA 23185 (757) 259-1841

Membership Application (*=required fields)

First Name:*	Last Name:*
Preferred Gender Pronouns:	
Position Title & Year Started: *	
Court: *	
Address: *	
E-Mail Address:*	
Office Telephone: *	Direct Line:
Annual dues are \$150 for regular members and separately.	d \$25 for retired members. A dues invoice will be sent to you
Email the completed application form with a dig	ital photo (.jpg format, minimum 300 dpi) to NCACC@ncsc.org.
	form and photo to the address listed in the header.
ADDITIONAL INFORMATION FOR THE ONLI	NE NCACC DIRECTORY.
Month & Day of Birth:	_ Home Telephone:
Home Address:	
Employment History:	
Education:	
Biographical Information (family, hobbies, spec	ial interests, etc.):