



# MASSP — Division of Student Activities

## MINNESOTA ASSOCIATION OF STUDENT COUNCILS

### MINNESOTA ASSOCIATION OF STUDENT COUNCIL ADVISORS

### 2022-2023 MEMBERSHIP APPLICATION

PLEASE TYPE OR PRINT

SCHOOL NAME \_\_\_\_\_

SCHOOL ADDRESS \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_

TELEPHONE (\_\_\_\_) \_\_\_\_\_ FAX NUMBER (\_\_\_\_) \_\_\_\_\_

PRINCIPAL \_\_\_\_\_ GRADES ATTENDING \_\_\_\_\_

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**STUDENT COUNCIL ADVISOR** \_\_\_\_\_

STUDENT COUNCIL ADVISOR'S EMAIL: \_\_\_\_\_

NEW ADVISOR? \_\_\_\_ YES \_\_\_\_ NO NUMBER OF YEARS ADVISOR HAS SERVED AS A STUDENT COUNCIL ADVISOR \_\_\_\_

**STUDENT COUNCIL ADVISOR** \_\_\_\_\_

STUDENT COUNCIL ADVISOR EMAIL: \_\_\_\_\_

NEW ADVISOR? \_\_\_\_ YES \_\_\_\_ NO NUMBER OF YEARS ADVISOR HAS SERVED AS A STUDENT COUNCIL ADVISOR \_\_\_\_

**STUDENT COUNCIL PRESIDENT** \_\_\_\_\_

STUDENT COUNCIL PRESIDENT'S EMAIL: \_\_\_\_\_

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### MINNESOTA ASSOCIATION OF STUDENT COUNCIL ADVISORS (MASCA)

### 2022-2023 MEMBERSHIP APPLICATION

ADVISOR \_\_\_\_\_ ADVISOR \_\_\_\_\_

NUMBER OF ADVISOR(S) x \_\_\_\_\_ x \$15.00 = \$\_\_\_\_\_ (enter this amount in your totals below)

**MEMBERSHIP TYPE:** \_\_\_\_\_ \$85 Membership for Student Council (High School)

\_\_\_\_\_ \$65 Membership for Student Council (Middle Level and/or Junior High School)

\_\_\_\_\_ \$ \_\_\_\_\_ Membership for MASCA

\_\_\_\_\_ \$ Total payment for memberships you have selected

Return this form & check payable to: Minnesota Association of Student Councils or MASC  
2 Pine Tree Drive • Suite 380 • Arden Hills, MN 55112 • Fax: 612-361-6340 • Phone: 612-361-1510