PDK Association Professional Membership Form

Return form to:
P.O. Box 13090 • Arlington, VA 22219
PHONE 800-766-1156 • FAX 812-339-0018
www.pdkintl.org/association-page • memberservices@pdkintl.org

MEMBER BENEFITS

Learn
About the latest research in education

Grow
Your skillset, no matter where you are in your career

Influence
The National conversation on education

Support
The next generation on future educators

ABOUT YOU

Name ______________________________________  ______________________________________  ______________________________________
FIRST       MIDDLE      LAST

Preferred First Name ______________________________

Primary Address

Street/P.O.Box ______________________________________

City ______________________________  State/Province ______________________________

Zip/Postal Code ______________________________  Country ______________________________

Choose Primary ☐ Office Phone (Ext.) ______________________________  ☐ Home Phone ______________________________

☐ Cell Phone ______________________________  Email Address ______________________________

☐ Male  ☐ Female  ☐ Show profile in member directory

Required for electronic publications and member updates. Treated confidentially.

Employment Information (Choose One.)

☐ Early Childhood/Preschool  ☐ Higher Ed Instruction – 4 year institution
☐ K-12 Instruction/Administration  ☐ Higher Ed Admin – 2 year institution
☐ Superintendent/District Office  ☐ Higher Ed Admin – 4 year institution
☐ State Education Agency  ☐ Association/Nonprofit
☐ Higher Ed Instruction – 2 year institution

☐ National Board Certified School | Name/College or University/Employer ______________________________
For Teachers, subject taught ______________________________

Highest Degree Earned

☐ Bachelors  ☐ M.D
☐ Doctorate  ☐ M.B.A.
☐ D.D.S.  ☐ M.L.S.
☐ D.O.  ☐ M.S.W.
☐ J.D.  ☐ Other
☐ Master’s  ☐ Specialist

☑ Race
☐ American Indian/ Native American  ☐ Native Hawaiian/Other Pacific Islander
☐ Asian  ☐ White
☐ Black/African American  ☐ Other
☐ Hispanic/ Latino of any kind  ☐ Two or more races
☐ Prefer not to answer

PDK FORM PRO (REV. 08/2022)
MEMBERSHIP FEES & PAYMENT

FEES

Annual Membership Fee $99.95

There will be a $5 processing fee added to all check payments.

Save by joining online at www.pdkintl.org/association-page.

☐ I want to affiliate with a local PDK chapter: _______________________________________________________________________

(Enter chapter name and number. To find a chapter and the associated dues, go to www.pdkintl.org/association-page.)

Local Chapter Dues $_______

(Enter chapter dues amount.)

Total Amount Due $_______

PAYMENT

Membership is for one year from the date payment is received at the international office. Choose your payment plan.

☐ ANNUAL Easy Pay Option — For uninterrupted service, PDK will bill your credit card at the current renewal rate once a year on your anniversary date. Notify PDK to change.

☐ STANDARD One-year Membership — Pay with credit card, check or money order in U.S. dollars.

☐ Check payable to Phi Delta Kappa International in the amount of $_______ is enclosed.

☐ Please bill my: ☐ VISA ☐ MasterCard ☐ Discover ☐ American Express

CREDIT CARD NUMBER ____________ ____________ ____________ ____________

EXPIRATION DATE mm/yyyy

CARDHOLDER NAME (PRINTED) ____________________________________________

SIGNATURE (REQUIRED) ________________________________________________

DAYTIME TELEPHONE ____________________________ DATE ______________

PDK MEMBERSHIP BENEFITS

• Kappan magazine
• Opportunities to travel abroad through PDK International Study Tours
• Scholarships, grants, academic awards, and leadership opportunities
• Online archive of data from the PDK Poll of the Public’s Attitudes Toward the Public Schools
• Networking opportunities with other educators across the country through PDK Virtual Townhalls

Visit pdkintl.org/association-page for more information on your member benefits