



South Carolina Association for Pupil Transportation

Annual Membership Form

Personal Information

Name: _____

Date: _____

Name on Badge: _____

Title: _____

Representing: _____

County/District: _____

Email: _____

Mailing Address: _____

State: _____

Zip: _____

Office Phone: _____

Cell Phone: _____

Membership Type

**2008-2009
Membership Price Structure**

A - \$ 10.00

B - \$40.00 (*)

C - \$100.00

(A) SCAPT Annual Membership Only: _____

(B) SCAPT Membership plus Annual Workshop Attendance: _____

(Excludes NAPT membership) (*)

(C) SCAPT Membership plus Annual Workshop Attendance: _____

(Includes NAPT membership)

(*) *An additional \$25.00 is required for each NAPT class that you attend.*

Please make checks payable to SCAPT and mail membership form, and payment to:

Mr. Lamar Atkins / Sumter School District #17

P.O. Drawer 1180

Sumter, SC 29151