

**ALABAMA INDEPENDENT SCHOOL ASSOCIATION**  
**Membership Application**  
**Effective 2021**

School/Organization \_\_\_\_\_

Physical Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

School Mailing Address (If different) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Phone # \_\_\_\_\_ Fax# \_\_\_\_\_

School's Web Address \_\_\_\_\_

Head Administrator's Name \_\_\_\_\_

Job Title \_\_\_\_\_ Email Address \_\_\_\_\_

Grade Levels Served \_\_\_\_\_ Total Enrollment (K5-12) \_\_\_\_\_

Board Chairperson \_\_\_\_\_

If you are interested in any additional AISA services listed below, please check all that apply:

\_\_\_\_\_ AISA/Cognia Accreditation

\_\_\_\_\_ Athletics

Administrator's Signature: \_\_\_\_\_

Please complete this application and return it to the AISA office along with the \$150.00 application fee. Once your application has been processed, our office will contact you for more information specific to your membership request and to arrange a prospective member visit. Following the visit, the AISA Executive Director will make a membership recommendation to the AISA State Board, and the AISA State Board will make the final decision on all memberships.

AISA  
9164 Eastchase Pkwy  
Box 324  
Montgomery, AL 36117

For AISA Office Use Only

Received Date: \_\_\_\_\_ Application Fee: \_\_\_\_\_