

Student Education Association

SEA MEMBERSHIP APPLICATION

MEMBERSHIP YEAR: 20___ TO 20___

Date	
Name	
Address	
City, State, Zip	
Phone Number	
E-mail Address	
Please check one:	
Havre Campus	Great Falls Campu
Submit the completed application to:	
Student Education Association	

Student Education Association
Montana State University-Northern
Education Department-Initial Education Program
Cowan Hall 104
P.O.Box 7751
Havre, Montana 59501