

About ICCTA

The Illinois Community College Trustees Association was created in 1970 with a two-fold mission: to provide **community college advocacy** and **trustee development opportunities** to the board members of the state's public community colleges.

For more information on ICCTA and its activities, contact us at:

401 E. Capitol Avenue, Suite 200
Springfield, IL 62701-1711
1-800-454-2282
iccta@communitycolleges.org



ICCTA Lifetime Membership

*An opportunity to honor
retiring community college trustees*



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An Opportunity to Honor Retiring Trustees

The ICCTA **Lifetime Membership** program provides a prime opportunity for an Illinois community college to honor its outstanding and retiring board members for their service and contributions to the community college movement.

New **Lifetime Members** are introduced at the association's Annual Convention and presented an elegant **Lifetime Membership** plaque.

ICCTA **Lifetime Members** receive:

- Complimentary registration to ICCTA's Annual Convention
- Copies of ICCTA's Membership & Legislative directories
- Special "member" rates for ICCTA seminars and products
- Free subscription to ICCTA's *Action Alert* and e-mail updates
- Listing in the annual ICCTA Membership Directory
- Acknowledgment on ICCTA's web site at www.communitycolleges.org
- Members-only access to ICCTA library and "Quick Survey" research

Lifetime Members do not hold voting privileges in ICCTA but are welcome to attend the association's board and committee meetings.

The cost of an ICCTA **Lifetime Membership** is \$500, which may be paid in \$100 installments over five years. Trustees who have previously held Associate Membership in ICCTA will be given a \$100 credit for each year of paid Associate Membership.

Please mail the completed application to:

Illinois Community College Trustees Association
401 E. Capitol Avenue, Suite 200
Springfield, IL 62701-1711
217-528-8662 (fax)
www.communitycolleges.org

ICCTA Lifetime Membership Application

Applicant's Name _____

Address _____

City/State/Zip _____

Phone _____

E-mail _____

Trustee/former trustee of: _____

Please check one:

I wish to become a **Lifetime Member** of ICCTA.

We wish to honor the individual above with a **Lifetime Membership** in the Illinois Community College Trustees Association.

Honored by: _____

Name of community college

Please indicate your payment method (make checks payable to "ICCTA"):

Enclosed is my \$500 **Lifetime Membership** fee.

I would like to pay my **Lifetime Membership** fee in five annual installments. Enclosed is my first payment of \$100.

I have previously held year(s) of Associate Membership in ICCTA. Please credit me \$100 for each year as an Associate Member.

I C C T A

For more information, contact
ICCTA at 1-800-454-2282