



2025-2026
Membership Application and Dues Invoice

Type or print clearly:

Name: _____ Title: _____

School District/Company: _____

Address: _____

City, State, Zip: _____

County: _____ Telephone _____ Fax _____

Email address: _____

Please indicate: _____ New member _____ Renewal of membership

Membership category:

_____ Active member (\$25 Annual Dues)

_____ Second member (\$15 Annual Dues)
And additional members from same district

_____ Associate member (\$15 Annual Dues)

I would like _____ to receive information regarding membership in MSBO/UPSBO.

Please mail application and payment to:

UPSBO
c/o Tracy McCord, Grants Facilitator/Transportation Coordinator
Eastern Upper Peninsula ISD
315 Armory Place
Sault Ste. Marie, MI 49783
(906) 632-3373 x5104
tmccord@eupschools.org