

## MEMBER APPLICATION/RENEWAL

**Individual Membership: \$20**

**Student/Parent/Retiree: \$10** (Full-time students, retired educators, non-educator parents)

**School Group Memberships:** 20 or more memberships from the same site, accompanied by individual membership forms and one check covering all memberships: **\$12 per educator**

Date \_\_\_\_\_ Renewal \_\_\_\_\_ or New \_\_\_\_\_

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ - \_\_\_\_\_

Phone: Business (\_\_\_\_) \_\_\_\_\_ Home (\_\_\_\_) \_\_\_\_\_

Email: Business \_\_\_\_\_ Home \_\_\_\_\_

School \_\_\_\_\_ System \_\_\_\_\_

Position Held: (circle one)      Teacher      Principal      Asst. Principal      Counselor

Supervisor/Coordinator      Librarian      College/University      Retiree

Non-educator Parent      Consultant      Full time Student

### TYPE OF MEMBERSHIP

Individual \_\_\_\_\_ \$20 \_\_\_\_\_

Group Rate (20 or more from one site) \_\_\_\_\_ \$12 each \_\_\_\_\_

Student \_\_\_\_\_ Retiree \_\_\_\_\_ Non-Educator Parent \_\_\_\_\_ \$10 \_\_\_\_\_

Send check payable to TAMS to above address      Total amount of check \_\_\_\_\_