



2009 ASLTA Membership
PO Box 92445
Rochester, NY 14692-9998

2009 Membership Application

To maintain valid certification [Provisional or Qualified or Professional], dues must be paid each and every calendar year
Dues cycle is based on annual calendar year, January to December

PLEASE PRINT CLEARLY!

Member's Information:

Last: _____ **First:** _____

Address: _____

Main email: _____

Other contact info: _____

Institutional Affiliation: _____

Membership Categories: (select one)

Certified Membership (Voting) \$ _____ (\$50)

Circle one: Provisional _ Qualified _ Professional

Associate [Non-certified] Membership \$ _____ (\$40)

(Voting)

(Non-certified ASLTA members, Aspiring Teachers, Mentors, Presenters)

ASL Honor Society Chapter Sponsor \$ _____ (\$35)

(for those teachers who are not certified but are sponsors of the ASLHS chapter in their school)

Supporting Membership (Non-Voting) \$ _____ (\$25)

(for general public –non-teachers - who would like to lend support to the efforts of the national organization)

Institutional Membership (Non-Voting) \$ _____ (\$150)

(for organizations, schools, publishers, etc.)

Donation: \$ _____

For office use only:

Thank you letter sent _____

TOTAL: \$ _____

Important Privacy Notice:

ASLTA maintains a database of all membership information. This database is kept strictly confidential, with access only by members of the Board and the Membership Coordinator. However, when deemed appropriate by the Board, announcements or news may be sent via email to members on the list. If you wish to NOT receive any emails, Initial here: _____
ASLTA may set up a membership directory on our website. Members' names, state of residence, and certification level may be published. If you do NOT wish to have your information in the directory, Initial here: _____ Lack of initials implies consent.