

Texas State Reading Association /Alamo Reading Council (#48060) Joint Membership Application

Name: _____ Date: _____

Address: _____ Home E-Mail: _____

City: _____, TEXAS Zip _____

Work Phone: () _____ Home Phone:() _____ Fax: _____

School Name/District: _____ Work E-Mail: _____

TEA School Number # _____

Position:

Teacher
 Librarian
 Campus Administrator
 Supervisor/District Administrator

Student
 Junior/Community College
 College/University
 Parent
 Other
 (specific) _____

IRA # _____ Expiration date: _____

Joint Membership Dues

Renew: TSRA Membership # _____ New Member: _____

Full Membership \$35.00 \$ _____

Student Membership \$15.00 (Full Time Undergraduate only) \$ _____

Faculty Signature: _____

Special Interest Council Dues:

Texas Association of Professors of Reading \$10.00 \$ _____

TX Council for Reading & the Bilingual Child \$10.00 \$ _____

TX Gifted & Talented Special Interest Council \$10.00 \$ _____

Total Joint and Special Interest Dues Enclosed \$ _____

Please send this form with payment to our Alamo Reading Council Treasurer.

Debbie Guerra
 11003 Wilson Oaks Drive
 San Antonio, TX 78249