



ASLA Membership Application

- New Member
- Renewal

Name _____ Date _____

Mailing Address _____

Email address _____

City _____ State _____ Zip _____

School _____

- | | |
|--|---|
| <input type="radio"/> Elementary Teacher | <input type="radio"/> Special Education Teacher |
| <input type="radio"/> Middle/High Teacher | <input type="radio"/> Reading Specialist |
| <input type="radio"/> Secondary Teacher | <input type="radio"/> Paraprofessional |
| <input type="radio"/> Retired Educator | <input type="radio"/> Administrator |
| <input type="radio"/> Parent or Community Member | <input type="radio"/> Librarian |

LOCAL COUNCIL/STATE MEMBERSHIP

As a member of ASLA you are automatically a member of your local council

ANNUAL DUES (From date of application)

- | | | |
|------|-----------------------|--|
| \$25 | <input type="radio"/> | Cook Inlet Literacy Council (Anchorage Area) website: cookinletliteracy.com |
| \$25 | <input type="radio"/> | Golden Heart Reading Council (Fairbanks Area) website: ghlc.weebly.com |
| \$25 | <input type="radio"/> | Valdez Literacy Council |
| \$15 | <input type="radio"/> | Member At Large (not affiliated with a council) |
| \$10 | <input type="radio"/> | Student Member |

Current International Literacy Association Member?

Yes ILA MEMBERSHIP # _____

No **Visit the International Literacy Association at www.literacyworldwide.org**

Make check payable to and submit to your local council.

If joining as a Member At Large please send a copy of this completed form and dues to:

ASLA
Attn: Membership Director, PO Box 212596, Anchorage, AK 99521