

Tucson Institute of Professional Educators **Membership Application 2005 / 2006**

Your Name

Name by which you prefer to be addressed

Mailing Address
(please include zip)

Place of Employment

Title

Telephones Home

..... Work

..... Mobile

Email Address

Membership Category (please circle one)

1 July 2005 – 30 June 2006	Student	\$10
	Senior	\$10
	Teacher	\$10
	Other	\$10

Payment should be made by cheque, payable to “Tucson Institute of Professional Educators”. Please note that membership payments are non-transferable and non-refundable.

Your information will not be shared with a third party.

I have read and agreed to the Tucson Institute of Professional Educators Terms and Conditions 2005 / 2006 and a signed copy thereof is either attached herewith or is already held by Tucson Institute of Professional Educators.

Your Signature (Signatures should be originals, please use blue ink)

Your Name