



Membership Application

Mid-America Teachers of English to Speakers of Other Languages

<http://www.midtesol.org>

Membership Number: _____
 Name: _____
 Home Address: _____
 City: _____ State: _____ Zip _____
 Home Phone: _____

Work Address: _____
 City: _____ State: _____ Zip _____
 E-mail: _____ @ _____
 Work Phone: _____
 Fax: _____

Please use the following for contact information: / / Home / / Work

_____ This is a change of address.

Affiliation / Employer: _____

Sign me up for (Check one):

MIDTESOL Membership: <input type="checkbox"/> New <input type="checkbox"/> Renewal	Dues: <input type="checkbox"/> \$12.00 (one year) <input type="checkbox"/> \$30.00 (three years)	Other Membership Types: <input type="checkbox"/> \$ 7.00 Student Membership** <input type="checkbox"/> \$ 20.00 Institutional Mbrshp
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** I, _____, verify that the applicant is a full-time student at _____
 _____ (name of institution). Student Advisor Signature: _____

Levels at Which you are working currently	/ / Elementary	/ / Secondary	/ / College / University	/ / Adult Education
Interest Areas: Check areas you want to collaborate in for MidTESOL	/ / K-12**	/ / Intensive Programs**	/ / Community Colleges / Adult Education**	/ / Higher Ed / Teacher Training**
**Represents current MIDTESOL active sections	/ / Social / Political Concerns	/ / Research	/ / Publications	/ / Board / Leadership

If you don't want your information in the Membership Directory:

I would **NOT** like my information published in the MIDTESOL Membership Directory / /

The information furnished above is used exclusively for purposes of MIDTESOL communication and membership, available only to members for networking purposes/opportunities. It will **NOT** be sold to anyone.

Please send your check payable to **MIDTESOL** and mail it with this form to:

William G. Trudeau,
International English Program – MSSU
3950 Newman Road
Joplin, MO 64801-1595

TESOL and MIDTESOL associations are separate. Membership in one does not provide membership in the other.