

# 加州中文教師協會

Chinese Language Teachers Association of California

## Membership Application/Renewal Form

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I. \_\_\_\_\_

Chinese Name \_\_\_\_\_ Title: Mr./Mrs./Miss/Ms/Prof./Dr.

Gender: Male / Female

Work Place/School: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail (print clearly): \_\_\_\_\_  
(Please provide your email address for more timely communications.)

Web Site (if any) : \_\_\_\_\_

Phone: (work) \_\_\_\_\_ (home) \_\_\_\_\_

Fax: \_\_\_\_\_

Membership fee (please check , the appropriate box below):

New Member:  Annual \$15,  Life \$150

Renewal:  (Annual \$15)

Total Enclosed: \$ \_\_\_\_\_ (check **payable to CLTAC**)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please print out this form, fill it out and mail to :

**Treasurer, CLTAC, P.O. Box 1428, Monterey, CA 93942**

Please allow 2-4 weeks for processing. Note that the current CLTAC policy is not to disclose any personal information.