

Atlanta Area AOSA Membership Form 2014-2015

Please fill out form completely

Name _____

Address _____

City _____ State _____ Zip _____

Phone Number _____ E-mail _____

Position/Grade Level _____

School/Church _____

School System or County _____

Are you a full time college/graduate student? YES NO What college? _____

Workshops Registration

(Please check appropriate lines and total at the bottom)

_____ **2014-15 Workshop Series** **\$80**

(Includes Local Membership Dues – Renewal _____ First Time _____)

*Best Deal – Local Membership Dues plus all 5 workshops listed below!

***IMPORTANT: Are you a member of National AOSA? YES NO**

Individual Workshops

_____ September 27, 2014 – Artie Almeida (9am-3pm) **\$30**

_____ October 25, 2014 – Grace Jordan **\$20**

_____ February 28, 2015 – Paul Cribari **\$20**

_____ March 28, 2015 - Atlanta Area Chapter Sharing **\$20**

_____ April 25, 2015 – Maribeth Yoder-White **\$20**

_____ **Local Membership Only (Renewal _____ First Time _____)** **\$20**

Total Money Enclosed _____

Make checks payable to Atlanta Area AOSA and send form/payment to:

Linda McCampbell
3885 Hunters Chase SW
Conyers, GA 30094

www.atlantaorff.org

Treasurer Use Only:

Rec _____

Cash _____ Check _____