

National Tutoring Association New and Renewal Membership Form

NAME _____

TITLE _____

INSTITUTION _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

MAILING CODE _____ COUNTRY _____

PHONE NUMBER (____) _____ FAX NUMBER(____) _____

Email (Required to receive newsletters) _____

DATE _____

Briefly describe your involvement with tutoring:

TYPE OF MEMBERSHIP : (check one) New _____ Renewal _____

KIND OF MEMBERSHIP: (check one)

Student Membership \$10.00 _____ Professional Membership \$55.00 _____

Program Membership \$100.00 _____ Institutional Membership \$450.00 _____

Make checks payable to: The National Tutoring Association

Send completed form with your check to: Dr. Sandi Ayaz, Executive Director,
National Tutoring Association
PO Box 6840,
Lakeland FL 33807-6840

NTA'S EIN NUMBER IS 35-2196495