

Method of Payment

___ Cash ___ Check

Check #:

VIRGINIA STATE READING ASSOCIATION 2009-2010 MEMBERSHIP FORM

The VSRA Membership year runs from September 1, 2009 – August 31, 2010. In order to obtain full benefits (journal, newsletters, etc.) membership must be received by December 15.

Please print LEGIBLY and provide all information requested to insure that you receive all local council and VSRA mailings, including email announcements.

Date _____

Last Name _____ First Name _____ Middle Initial _____

Home Address _____

City, State, Zip _____ Home Phone _____

School Division/University _____ School _____ Position _____

*E-mail _____ Work/Cell Phone _____

*needed to receive newsletters, announcements, and reminders

Name of Council you are joining _____ New Member Renewing Member

Type of Membership: Professional Full-time Student Para-professional Retired

I wish to join the Secondary Reading Council for an additional \$5.00

International Reading Association Member? Yes No If yes, list IRA Membership # _____

Would you like information about the International Reading Association: Yes No

Return form with check payable to VSRA for \$40:

Linda Greaver
VSRA Membership
210 Silver Leaf Dr.
Christiansburg, VA 24073