

INTERNATIONAL READING ASSOCIATION

Guam Council

P.O. Box 21733

G.M.F., Guam 96921

<http://iraguam.blogspot.com>

MEMBERSHIP APPLICATION

PRINT ALL INFORMATION CLEARLY:

FY 20____-20____

Last Name:_____ First _____ M.I. _____

Mailing Address:_____ Home Phone:_____

_____ Work Phone:_____

School/Work Location:_____ Fax:_____ Cell:_____

Grade(s)/Subject:_____ E mail: _____

NATIONAL MEMBERSHIP #:_____ EXP DATE:_____

Statement of Receipt:

Payment of _____ Received by _____ on _____

Method of Payment: Cash/Check # _____

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