



2018-19 MEMBERSHIP FORM

Full STEAM Ahead: Fusing ART with Math and Science

Welcome to Art in the School! Please fill out this form completely. Check one:

____ I am the **Volunteer Coordinator** for my school. ____ I am a **volunteer** (not coordinator) at my school.
____ I am a **certified teacher**. (no charge) ____ I am currently an **E.A.** at my school.

FOR COORDINATORS ONLY: Please tell us who we should mail the invoice to.

Invoice to: _____ Title _____

Address: _____ CITY/ZIP: _____

Your name: _____

SCHOOL: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

*Please print email address very clearly in **ALL CAPS**.*

New Presenter? Yes No

Number of previous years with Art in the School: 1 2 3 4 5 or _____

Tell us a bit about yourself! We like to get to know a little about who we are teaching.

Educational Background: (Optional)

____ High School Graduate ____ Technical/Vocational Graduate; Area of Study _____

____ College Degree: _____

____ If you have an education degree, please indicate years of teaching experience.

What interested you in becoming a volunteer for Art in the School?

*Art in the School, Inc. reserves the right to terminate the membership of any volunteer who is disruptive in training sessions or misrepresents Art in the School in their school or classroom. As a member of **Art in the School**, I am aware that the **Art in the School** lesson plans are copyrighted and may not be duplicated, transmitted or recorded without written permission from the publisher.*

Name: _____
(Signature)

Date: _____