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**Illinois Teachers of English to Speakers of Other Languages/Bilingual Education  
MEMBERSHIP APPLICATION**

Please visit us at: [www.itbe.org](http://www.itbe.org)

<b>CHECK ONE (X):</b>	
___NEW	___RENEWAL
DATE ___/___/___	
<b>PLEASE PRINT OR TYPE:</b>	
First Name: _____	Employer(s): _____
Last Name: _____	_____
Mailing Address _____	Home Phone ( ) _____
City _____	Work Phone ( ) _____
State _____ Zip _____	Fax ( ) _____
	E-Mail Address _____
<b>CHECK IF CHANGE OF (X):</b>	
___NAME	___ADDRESS
<b>1-YEAR MEMBERSHIP</b>	<b>2-YEAR MEMBERSHIP</b>
<input type="checkbox"/> Regular \$35.00	<input type="checkbox"/> Regular \$60.00
<input type="checkbox"/> Student* \$20.00	
*Student membership applications must be accompanied by verification of full-time enrollment (e.g., current semester registration).	
**Family members residing at the same address may apply at the joint membership rate.	
<b>Membership in Illinois TESOL/BE is separate from membership in TESOL</b>	
Check (X) if you <b>DO NOT</b> want your name published in our state directory: _____	
Check (X) if you want to receive the <b>ITBE Newsletter</b> , which is distributed via email: _____	
Check (X) if you want to receive Job Opportunities via email: _____	
I am member of: <input type="checkbox"/> IEA/NEA <input type="checkbox"/> IFT/AFT <input type="checkbox"/> NABE <input type="checkbox"/> IACEA <input type="checkbox"/> TESOL <input type="checkbox"/> IAMME	
I work primarily in: <input type="checkbox"/> Adult Education <input type="checkbox"/> Elementary Education <input type="checkbox"/> Secondary Education <input type="checkbox"/> Higher Education	
I am interested in working on the following committee(s):	
<input type="checkbox"/> Convention <input type="checkbox"/> The ITBE Link (Newsletter) <input type="checkbox"/> Professional Development (Workshops) <input type="checkbox"/> Scholarship/Awards	

**Mail a check and this form to:**

**Membership  
Illinois TESOL/BE  
PMB 232  
8926 North Greenwood Avenue  
Niles, IL 60714-5163**

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Illinois TESOL/BE will assess a fee of \$50 on all returned checks. Please allow 4-6 weeks for processing for mailed  
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