

PLEASE JOIN LAD
Fill out membership form COMPLETELY!

Name: _____ Grade level _____

Home address: _____
Street City/State Zip

School name: _____

School address: _____
Street City/State Zip

Home Phone: _____ School phone: _____

Email address: _____ School fax: _____

I prefer mail from LAD to be sent to _____ Home _____ School

Check the day which you will volunteer on the volunteer sheet on the next page
and mail directly to the designated volunteer chair.

Mail membership fee to
Emily Seiler
Carver Middle School
3325 W Battlefield Road
Springfield, MO 65807

Phone: 417-523-6800
Email: eseiler@spsmail.org

Check appropriate membership category:

_____ Individual member (\$20.00). Entitles participation in all LAD events.

_____ First year teacher (FREE). Entitles participation in all LAD events.

_____ Student member (\$5.00). Acquaints students with LAD.

_____ Retired teacher member (\$10.00) Allows continued involvement with LAD.

LAD is open to anyone interested in the promotion of language arts regardless of age, gender or race.