

WSTA Membership Application and Renewal Form

Last Name **First Name**

Preferred Mailing Address

City, State, Zip code

Preferred Phone

School/ Company

District **Preferred e-mail**

Circle applicable categories in each column.

Elementary School Middle School Senior High School Comm. College College/University Industry/Business/Government Other (list) _____	Elementary Sciences Life Sciences/ Business Physical Sciences Environmental Science Earth Science/Geology	Chemistry Physics Integrated Science General Science	Teacher Administrator Coordinator Librarian student spouse	Retired
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Please circle your membership choice.

\$25.00/One year membership	\$45.00/Two years	\$65.00/Three year	\$15.00/One year-Student
\$40.00/One yr-member +spouse	\$70.00/Two yr-member +spouse		\$100.00/3 yr. +spouse
\$15.00/One year-Retired	\$200.00/One Year-Business/Industry/Govt		Free 1 st year teacher

Apply online at www.wsta.net **OR** send a check to our membership chair.

Make checks payable to: **Washington Science Teachers' Association**

Mail check and completed application to: WSTA
 PO Box 843
 Ephrata, WA 98823.

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