



AMTE Membership Form

Information

Name: _____

Institution: _____

Position: _____

Mailing Address: _____

City: _____ State/Province: _____ Zip/Postal Code: _____

Home Phone: _____ Work Phone: _____

Fax: _____ Email: _____

New Member

Membership Renewal

Note: This information will be accessible to AMTE members on the website. If you would like any of the information about to NOT be included, please list here which information you would like excluded:

Dues Options

- | | |
|---|---|
| <input type="checkbox"/> 1 Year General Member \$80 | <input type="checkbox"/> 1 Year Retired Educator \$40 |
| <input type="checkbox"/> 2 Year General Member \$152 (save 5%) | <input type="checkbox"/> 2 Year Retired Educator \$76 (save 5%) |
| <input type="checkbox"/> 3 Year General Member \$216 (save 10%) | <input type="checkbox"/> 3 Year Retired Educator \$108 (save 10%) |
| <input type="checkbox"/> 1 year Full-time Student \$40 | |

(students require additional [Graduate Verification Form](#) at www.amte.net/gradstudent)

Dues may be paid online at www.amte.net, or if paying by **check** (payable to AMTE) or **credit card**, please print out this page, complete the form and return it with your dues, to:

Mail To:
Anita Wager
476F Teacher Education Building
University of Wisconsin - Madison
225 N Mills St.
Madison, WI 53706-1707

Anita Wager, Treasurer, Contact Info
Email: AWager@Wisc.edu
Office: (608) 263-5142

If paying by credit card, please complete the following information:

Type of card: Visa MasterCard Discover

Name as it appears on the card: _____

Card number: _____ Expiration: _____

Amount to be charged: _____