

GCLE MEMBERSHIP FORM

会员申请表

Name *(English):* Click here to enter text. Name *(Chinese):*  Click here to enter text.

School/Organization Name: Click here to enter text.

School/Organization Official Web Site *(please print):* Click here to enter text.

Type of School/Organization [ ]  public [ ]  independent *(Double click on a box and then click “Checked” to add a checkmark.)*

Top of Form

*(Check all that apply)* *[ ]* K-8 [ ] K-12 [ ]  College/University Other Click here to enter text.

Bottom of Form

*[ ]* Teacher/Professor [ ]  Administrator Other Click here to enter text.

Grade Level(s) You Teach: Grade(s): Click here to enter text.

Mailing Address: [ ]  Home [ ]  Work

Street: Click here to enter text.

City: Click here to enter text. Zip Code: Click here to enter text.

Top of Form

Office Telephone: Click here to enter text.

Bottom of Form

Home/Cell Phone: Click here to enter text.

Fax: Click here to enter text.

E-mail: Click here to enter text.

GCLE Office Use Only

Date received

Check#

Online

Comment \_\_\_\_\_\_\_\_\_\_\_\_\_

Apply/Renew by Check

Please make check payable to:

Georgia Chinese Language Educators/GCLE

Mail check and filled form to

Gail Fang

West Hall High School

5500 McEver Rd.

Oakwood, Georgia 30566

*E-mail: gail.fang@hallco.org*

[ ]  Apply online

[ ]  Apply by check

[ ]  Renew online

[ ]  Renew by check

Bottom of Form

Top of Form

Bottom of Form

[ ]  Individual Membership: $25.00

[ ]  Institutional Membership: $100.00

 *(up to five teachers)*