



AMLE School Membership Application

Membership Type

School Membership
 \$249.99

Additional Products for Purchase

	Quantity		U.S.	Int'l.	
AMLE Magazine (Print Subscription)*	_____	X	\$ 14.99 ea.	\$29.99 ea.	= \$ _____
Middle School Journal (Print Subscription)*	_____	X	\$ 14.99 ea.	\$29.99 ea.	= \$ _____
Total Quantity	_____		Total Additional Products		\$ _____

*** Please identify recipients of additional products on the back of this form!**

School Contact Information

School Name _____

Primary Contact _____

Title _____

- Teacher *Subject(s)* _____ *Grade(s)* _____
- Principal Asst. Principal Guidance Curriculum Technology Superintendent Asst. Superintendent
- University Professor Central Office Library Staff University Administration Other

School Address _____

City _____ State _____ Zip _____

Country _____ Telephone _____

Fax _____ E-mail _____

Payment Methods

Purchase Order# _____
(attach purchase order)

Check# _____
(\$25 fee for returned checks)

- VISA MasterCard American Express Discover

Card Number _____

Expiration Date (mm/yy) _____ / _____ CSV Code _____

Cardholder Name (Print) _____

Signature _____

Amount Due \$ _____

Use back of form to add staff members.



