Colorado Chinese Language Teachers Consortium

Treasurer, **Kwang-Chi Sorenson**
Email: davidsorenson@msn.com

Membership Application

For Calendar Year January 1 – December 31, 20_____

☐ New Regular Member $30
☐ Renewal Regular Member $30
☐ New Student Member (w/valid ID) $20
☐ Renewal Student Member (w/valid ID) $20

Name: _____
(*Last*) (*First*) (*Middle*)

Chinese Name: _____

Address:_____
(*Street*) (*Apt. #*)

_____
(*City*) (*State*) (*Zip code*) (*Country*)

Telephone: (*office*)_____ **Telephone**: (*home*)_____

Telephone: (*cell*) _____ **E-mail**: _____
(Please print clearly)

Affiliated Institution_____

Annual membership dues: Due by December 31 for calendar year 20___. Please **make check payable to CCLTC**, and mail this form with your annual membership fee for the calendar year selected above to:

Kwang-Chi Sorenson
1009 Beacon Hill Way, Colorado Springs, CO 80905

I hereby apply for membership in the CCLTC _____
(*Signature*)

For office use:

DATE: _____ CHECK # _____

MEMBERSHIP EXPIRES: December 31, 20_____

TREASURER: _____
(*Signature*)