

SOHO STUDY GROUP MEMBERSHIP FORM 2018-19

MEMBERSHIP	IP CATEGORY: ☐ NEW MEMBER ☐ RENEWING ☐ NEW ADDRESS, EMAIL or Pi	HONE
PLEASE PRINT	NT CLEARLY	
DATE:		
NAME:		
STREET ADDRE	RESS:	
CITY, STATE, Z	E, ZIP:	
EMAIL		
PREFERRED PH	PHONE:	
YOUR TEACHI	CHER'S NAME	
YOUR CURREI	RENT RANK	
TEACHER:	□ 4 TH GRADE □ 3 RD GRADE 2 ND GRADE □ SANYO □ JONIN SANYO 1ST GRADE □ SOMU □ JONIN SOMU □ KOMON □ RI	IJI
WHAT IS YOUR STA NUMBER? YOUR GAGOH:		
	CURRENT MEMBER OF THE SOGETSU TEACHER'S ASSOCIATION? YEAR YOU A TEACHING OR NON-TEACHING MEMBER?	ES 🗖 NO
Annual dues of 2019.	es of \$20 will be collected by April 1st for the following fiscal year, ending	March 31st,
Please make	e checks payable to Soho Study Group and return with this completed fo	rm to:
Loretta Altsh 133 Montair	shuler ir Drive, Danville, CA 94526	
sogetsusohos	nostudygroup@gmail.com	