



SOHO STUDY GROUP MEMBERSHIP FORM 2018-19

MEMBERSHIP CATEGORY: NEW MEMBER RENEWING NEW ADDRESS, EMAIL or PHONE

PLEASE PRINT CLEARLY

DATE: _____

NAME: _____

STREET ADDRESS: _____

CITY, STATE, ZIP: _____

EMAIL _____

PREFERRED PHONE: _____

YOUR TEACHER'S NAME _____

YOUR CURRENT RANK

TEACHER: 4TH GRADE 3RD GRADE
 2ND GRADE SANYO JONIN SANYO
 1ST GRADE SOMU JONIN SOMU KOMON RIJI

WHAT IS YOUR STA NUMBER? _____ YOUR GAGOH: _____

ARE YOU A CURRENT MEMBER OF THE SOGETSU TEACHER'S ASSOCIATION? YES NO

IF YES, ARE YOU A TEACHING OR NON-TEACHING MEMBER?

Annual dues of \$20 will be collected by April 1st for the following fiscal year, ending March 31st, 2019.

Please make checks payable to Soho Study Group and return with this completed form to:

Keiko Kubo, Membership Chair:
632 – 63rd Street, Oakland, CA 94609 , 510-333-1974
keikokub@gmail.com