

Alberta Association of Family School Liaison Workers Annual Membership Renewal/Application Form 2017

Please Print

Date:

Name: _____

Position: _____

Employer: _____

School District: _____

Mailing Address:

Work: _____

Work phone: _____

Home phone: _____

Email Address: _____

I am NEW member

RENEWING

Where did you hear about the
AAFSLW:

I hereby consent to the AAFSLW reproducing or publishing my photograph for the Newsletter, website and/or promotion of the AAFSLW.

I hereby consent to my contact information being included in an AAFSLW membership distribution list that will be available to members ONLY.

Please send in your completed renewal form and dues made payable to: The Alberta Association of Family School Liaison Workers to: (these fees can also be paid at the Annual AAFSLW Conference)

Kelsie McCabe
3598-48 Avenue
Athabasca Alberta T9S 1T9

Phone: 780-675-8305
Fax: 780-675-5933
Email: kmccabe@athabascacounty.com

Note: Membership fee is \$40.00 payable by March 1st. Payments after March 1st. will be \$ 50.00

Amount Enclosed: _____ Method of Payment: _____

FOR OFFICE USE ONLY:

Payment:

\$40.00 _____ received

Membership card and sticker

\$50.00 _____ received

Certificate – new member