

☐ Yes☐ No☐ Share my info for German seminars, programs, etc.☐ Yes☐ No☐ Share my info with AATG Professional Partners.

112 Haddontowne Ct #104 Cherry Hill, NJ 08034 856.795.5553 info@aatg.org www.aatg.org

☐ Renewing M	lember ☐ New Member	Membership Category	
		☐ Regular Membership	\$90
Name		$\square$ Save and renew for two years	\$170
Name		$\square$ Save and renew for three years	\$255
		$\square$ Automatically renew my membership	each year
School / Institution	on	☐ <b>New Teacher</b> (fewer than 3 years experience)	\$45
		☐ Part-time Teacher (fewer than 3 classes)	\$45
Preferred Mailing Address ☐ Home ☐ Work  Opt-out of renewal reminders by mail ☐ Yes ☐ No		☐ Retired/Not Teaching	\$45
Opt-out of renev	val reminders by mail $\square$ Yes $\square$ No	☐ Full-time Student	\$25
		☐ <b>Joint Membership</b> (2 members in one househ	old) \$110
Address		Name	
		Email	
		☐ Contributing Member	\$150
		☐ Sustaining Member	\$250
City		□ Patron Member	\$500
		☐ Life Member	\$1926
State	Zip Code	Publications in Print	
		☐ <b>AATG Newsletter</b> Color magazine	\$50
Please check	preferred phone and email		7-5-
		Donations	
		AATG Endowed Scholarship Fund	\$
☐ Home Phone		Friends of AATG Endowment	\$
		AATG General Fund	\$
☐ Mobile Phone		Professional Development Endowed Fund	\$
☐ Work Phone		Total \$	
 ☐ Home Email		, <u> </u>	
_ nome timen		_	
☐ School/Work Email		Payment	
		☐ Check enclosed	
Charle all that are	art.	☐ Purchase order enclosed	
Check all that apply		☐ Credit Card ☐ VISA ☐ MASTERCARD ☐ AMEX	
☐ Elementary ☐ Community or 2-year College		$\square$ Automatically renew my membership with	this card each yed
☐ Middle / Jr. High ☐ 4-year College / University			
☐ High School ☐ Adult Education ☐ Saturday School ☐ Not Teaching or Retired		Conditionary and according	
☐ Online	☐ Minority Serving Institution (MSI)	Credit card number	
Z minority serving institution (many			<del></del>
For statistical purposes only (Data policy available at aatg.org)		Expiration date	Security code
☐ Male	Date of Birth	Name as it appears on card	
☐ Female	☐ Prefer not to say		
	_	Billing address	
Race/Ethnicity	☐ White/Caucasian ☐ Hispanic/Latino		
	☐ Pacific Islander ☐ Other ☐ Profer not to say	City / State / Zip	
	<ul><li>☐ African-American</li><li>☐ Prefer not to say</li><li>☐ Asian</li></ul>	- ·, / /	
	_ , (Jidi)	Signature	
		5. <sub>0</sub>	