



Application to Join AMAE

Association of Mexican American Educators, Inc.

Los Angeles, CA 90086-0054

(424) 261-2623 • ExecutiveDirector@amae.org

www.amae.org

Local Chapters (Check One)

| | |
|--------------------------|---|
| <input type="checkbox"/> | Central Coast (San Luis Obispo County) |
| <input type="checkbox"/> | Central Los Angeles (Metro Area) |
| <input type="checkbox"/> | East Los Angeles |
| <input type="checkbox"/> | Fresno Area |
| <input type="checkbox"/> | Inland Empire (San Bernardino and Riverside Area) |
| <input type="checkbox"/> | Los Angeles Harbor Area |
| <input type="checkbox"/> | Madera |
| <input type="checkbox"/> | North Central Valley (Stanislaus County Area) |
| <input type="checkbox"/> | Oxnard/ Ventura Area |
| <input type="checkbox"/> | Pajaro Valley (Watsonville) |
| <input type="checkbox"/> | Parlier |
| <input type="checkbox"/> | Porterville |
| <input type="checkbox"/> | San Diego |
| <input type="checkbox"/> | San Fernando Valley |
| <input type="checkbox"/> | Santa Maria |
| <input type="checkbox"/> | Santa Monica/ West Los Angeles |
| <input type="checkbox"/> | South Central Los Angeles |
| <input type="checkbox"/> | Visalia Area |
| <input type="checkbox"/> | I'm not sure. Please place me or make me a member at large |
| <input type="checkbox"/> | The chapters are too far away. I'd like to start a new chapter. Contact Executive Director. |

| | | | |
|-----------------|--|------------------|-----------|
| Date: | | New: | Renewal: |
| Name: | | | |
| Address: | | | |
| City: | | State: | Zip Code: |
| Home Phone: () | | Cell Phone: () | |
| E-Mail: | | | |
| District: | | | |
| School: | | | |
| Position: | | Membership Type: | |

Type of Memberships

State Dues + Chapter Dues

| |
|--|
| Regular: Open to all certificated personel (Teachers, Counselors and Administrators) \$50 + Chapter Dues |
| Retired: Open to all Regular AMAE Members Retired. \$25 + Chapter Dues |
| Paraprofessional • Associate • Student (non-certificated or community member) \$10 + Chapter Dues |

Please mail this form to the AMAE Office:

Attention Memebership, P.O..Box.86054,.Los.Angeles,.CA.90086-0054