

Name _____

Home Address _____

Zip _____

E-mail _____

School Address _____

ZIP _____

Membership dues:

Regular: \$50. Retired: \$15.

Student: (full time undergraduate) \$15.

New _____ Continuing _____

Make check payable to: Nassau Reading Council

Mail to: Kathleen Conway-Gervais

174 Nassau Blvd., West Hempstead, NY 11552-2218

Date: _____

Home Tel. () _____

Business Tel. () _____

() I do not wish to have my name included in
non-organization mailings

Please check your area:

_____ Classroom Teacher _____ Librarian

_____ Reading Teacher _____ Parent

_____ Reading Supervisor _____ Special Education

_____ College Teacher/Basic Skills _____ Education Sales

_____ College Teacher/Teacher Prep _____ Consultant

_____ Full Time Undergraduate _____ Retired

_____ Administrator _____ Other

I would be interested in serving on the following committee(s). Please check.

___ Annual Conference

___ Membership

___ Program-NRC/BOCES

___ Author Series

___ Newsletter

___ Young Authors' Contest

___ Books for Babies

___ International Guatemalan Literacy Project

Additional areas of interest or abilities: Please comment.
