SOUTHWEST CONFERENCE ON LANGUAGE TEACHING

Membership Form
Membership Year begins February 1 and ends January 31st

Note: If you will be attending the SWCOLT annual conference, you will not need to fill out this form because a one-year membership is included with your conference registration payment. If you are unable to attend the SWCOLT conference, but want to be a current member of SWCOLT, then please print this form and send it with your check, credit card information, or purchase order to SWCOLT headquarters at the address below.

Regular Membership $50
- Receive SWCOLT news via mail and eMail
- Receive an invitation to the SWCOLT members’ reception at the annual conference

Retired Educator Membership $25
- Receive SWCOLT news via mail and eMail
- Receive an invitation to the SWCOLT members’ reception at the annual conference

Full Time World Language Education Student Membership $25
- Receive SWCOLT news via mail and eMail
- Receive an invitation to the SWCOLT members’ reception at the annual conference

State World Language Teachers’ Association Membership $100
- Receive SWCOLT news via mail and eMail
- Submit a "Regional Teacher of the Year" candidate
- Submit a "Best of State" session to be automatically accepted into the annual conference program
- Complimentary exhibit table in the conference exhibit hall (when requested)

Did you know?
SWCOLT offers each scholarship recipient a $300 stipend to help with travel arrangements.
SWCOLT awards the Regional Teacher of the Year a $500 honorarium.
SWCOLT supports the "Best of SWCOLT" session presenter with $600 to help with costs at ACTFL.
We are able to provide these incentives to teachers because of your support of our organization. Thank you!

Please Print:
Name: ____________________________________________________________

Mailing Address Street: ____________________________________________________________
City: __________________________ State: _____________ Zip: ___________

EFMail address: ____________________________________________________________
School/Institution/Affiliation Name: ____________________________________________
Languages that you teach/supervise: ____________________________________________
Grade levels that you teach/supervise: ____________________________________________

Type of Membership:
____ Regular _____ Retired Educator _______ Full time FL education student _______ State Organization

I am paying with:
_____ a check (number _____________)
_____ credit card (number __________________ expiration date _____________________)
_____ purchase order (number ______________________)

Jody Klopp, Executive Director, 216 Merion Drive, Austin, Texas 78737 Phone:
(405) 613-1481 Fax: (888) 631-2583 Email: jody.klopp@okstate.edu