



APPLICATION FOR MEMBERSHIP

Name: _____

Preferred Mailing Address: _____

City: _____

State: _____ Zip: _____

Preferred Telephone Number: _____ (Home/Work/Cell)
(Please circle one)

Alternate Telephone Number: _____ (Home/Work/Cell)
(Please circle one)

Preferred email address: _____
(Please don't forget to sign up for email updates at www.toea.org)

Membership Level: Student (\$10 per year)
 Educator (\$20 per year)

Please provide information on your university, level or areas of education being taught, administrative level or interest in outdoor education so we can better serve you:

Sally McAfee
Vice President for Membership
192 Ward Ln
Trinity, TX 75862

OR

Gary Guenther
Executive Secretary
PO Box 335
Harper, TX 78631-0335